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# THE NATIONAL

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Pirie MacDonald

CLIFFORD W. BEERS

Founder of the Mental Hygiene Movement and  
Secretary of The National Committee for Mental Hygiene

# MENTAL HYGIENE

VOL. XIX

JANUARY, 1935

No. 1

## TWENTY-FIFTH ANNIVERSARY CELEBRATION OF THE NATIONAL COMMITTEE FOR MENTAL HYGIENE

ADDRESSES DELIVERED AT THE ANNIVERSARY DINNER HELD IN  
THE GRAND BALLROOM OF THE WALDORF-ASTORIA,  
NEW YORK CITY, ON WEDNESDAY, NOVEMBER  
14TH, 1934

### TWENTY-FIVE YEARS OF WORK

ARTHUR H. RUGGLES, M.D.

*Superintendent, Butler Hospital; President, The National Committee  
for Mental Hygiene*

A QUARTER of a century ago, Clifford W. Beers began work in behalf of the mentally ill. As a result of his epoch-making book, *A Mind That Found Itself*, the Connecticut Society for Mental Hygiene came into being, and not long thereafter The National Committee for Mental Hygiene.

In those days—within the memory of most of us—the effort was to improve hospital conditions and to afford wiser and better care for the mentally ill. These efforts met with such prompt response from the leaders in our communities that very soon public education was begun in the direction of a better understanding of the whole problem of mental disease and its care. Old ideas about demoniacal possession were still prevalent, and the unintelligent point of view that mental disease had little or no relation to other medical problems.

In the brief span of twenty-five years, The National Committee for Mental Hygiene has been able to change very materially this whole conception; to raise large sums of money for public education, for preventive work, and for the training of

personnel; and so to influence public opinion throughout the country that state appropriations for the study and care of mental diseases have become more nearly adequate.

Under our first director, that great physician, Dr. Thomas W. Salmon, the National Committee took a leading part in the organization of neuropsychiatric units during the war. Profiting by the experience of other countries, the work of this country for soldiers with nervous and mental disorders was of a high order. And during that period of the great war, many of us had the opportunity to see nervous and mental disorders in their incipency and to realize what could be done in the way of prevention and treatment.

Early in this quarter of a century, it became evident that we must take a more active part in the campaign of prevention, and that to do this we must work with children. This led to the development of the child-guidance clinics, financed in large part by the Commonwealth Fund, until now there are throughout the country many well-organized child-guidance clinics dealing with thousands of young people who need understanding and help if future mental shipwreck is to be prevented. This work with children led directly to the seeking of psychiatric advice with regard to the problems of delinquency and crime and to a better understanding of many of the problems of antisocial behavior.

There may be some who even to-day ask, "What has been accomplished?" As yet, this cannot be definitely stated in terms of percentages, but there are thousands of human beings in this country who now realize that in many instances mental disease is preventable and who are working toward that end. And there are many other thousands who, themselves in need of help, know where they can turn for trained understanding and for scientific treatment. This achievement alone—leaving out of consideration the many cases of mental disease that have been prevented or have had their illness cut short and been aided to make successful readjustments—would seem to be a tremendous contribution in the effort toward the betterment of our fellow human beings.

In more recent years, the work in college mental hygiene has opened up a very much more intelligent approach to a great mass of young men and women who are emotionally maladjusted or vocationally misplaced, and the fact that even

in these days of depression this work, instead of diminishing, has shown a slow, but steady growth, is another testimony to the success of our work.

Again, The National Committee for Mental Hygiene early saw the need of a great increase in trained personnel, and this led to the granting of a large number of fellowships through which men and women are prepared for leadership in the work of prevention and treatment.

There has never been a time in the history of this country when so many people were talking in terms of mental health and seeking to achieve it; when education, industry, and the community in general were so firmly convinced that of all the assets of mankind mental health is the most valuable, and that it is possible to develop ways by which it may be attained.

I will leave to the speakers who are to follow the details of past achievements, present needs, and future hopes. All that I have to say is this: The work instituted and fostered by The National Committee for Mental Hygiene, in its brief quarter century, has represented to countless thousands a kindly and sympathetic hand, pointing the way to those who could treat their difficulties with understanding and scientific care, and lead them from uncertainty, fear, and incapacity to a greater degree of security.

## MENTAL HYGIENE AND EDUCATION

JAMES R. ANGELL, LL.D.

*President of Yale University*

THOSE of you who are close enough to the speakers' table must have appreciated the delicacy of my position—sitting between my two very dear friends, both former colleagues, but both psychiatrists and both likely to point out any symptoms of a menacing character. (*Laughter*) This has considerably cramped my conversational style during the dinner and this is the first opportunity that I have had to express myself freely. Whether I can do that in the ten minutes, or in the fragment of that time which Dr. Ruggles allows, I somewhat doubt.

I am the only speaker on this program who must, I think, have been chosen to represent you, to some extent at least,



for I have no professional contact with the subject before us to-night, and I am not one of the living examples of what twenty-five years of contact with the mental-hygiene society will do in the promotion of longevity and other desirable qualities. (*Laughter*) But I am here to offer my very deep and sincere tribute of respect and admiration to Clifford Beers and to his associates in this extraordinary movement whose twenty-fifth anniversary we celebrate to-night, the like of which I think is quite without parallel in any of the great achievements of our own day. It is a very great pleasure to feel that, however inadequately, I may perhaps venture to represent you also as the lay portion of this audience, in extending this tribute to "Dr." Beers and our other official hosts here to-night.

My own attitude is, I think, well embodied in a tale that has been running around in my own community during the last fortnight, dealing with the essay of a young freshman—I will not say in Dr. Ruggles' institution, but in an institution in New England. This young gentleman was discussing the episode of Queen Elizabeth and Raleigh and his cloak. He gives a brief description of the circumstances, recalling how the queen, being faced with a deep and menacing puddle, is suddenly confronted with Raleigh, who throws his beautiful cloak before her. As she steps upon it, according to this youth, she turns and says, "Raleigh, I fear I have ruined your cloak." Whereupon Sir Walter, falling upon his knee, replies, "*Dieu et mon droit*," which, as the freshman freely translated it, means, "My God, you're right!" (*Laughter*)

Well, I hope you feel as I do, in all sincerity, that this movement has been right and that the Lord has been with it. It certainly seems to have accomplished so many amazing things in this quarter century that the effort to catalogue them—as is measurably attempted in the little program which has been put in our hands to-night—after all gives but a fragmentary picture of the great underlying human results of the undertaking, which can never be measured in those units that Dr. Ruggles referred to, or by any other similar method.

One thing, however, does appear to me to be conspicuously true of it all. In addition to—and, if you please, apart from—the contributions that it has made to individual lives in

the release from anxiety, from strain, and from unhappiness, is the fact that it has made us as a people profoundly conscious of those community and individual problems represented in our schools, in our courts, and in our common daily life, which on their lower levels we call difficulties of maladjustment and on the more serious levels of mental derangement designate by the names that our psychiatrists have invented for the various diseases concerned. This great movement has bred in us as a nation the resolution to attack these disorders with all our might, to seek their cure, and, much more, as far as possible to prevent their occurrence. Anything that has actually accomplished this in so short a period seems to me one of the most remarkable of human achievements. It is, therefore, in no perfunctory sense whatever that I come to pay my tribute to the men who have been responsible for it. I am sure I voice your feeling when I speak thus for myself.

Looking forward to the next twenty-five years as a layman, I naturally cannot predict what is before us. I do, however, voice the hope and the belief that these years may see us successful in getting behind the scenes, behind the curtain that still screens from us the essential causes of that great body of mental and emotional ailment which is so terrible a burden both on the individual and on the social group. At this point and at that, it may be possible to find the major factors that occasion these troubles. Some of them may be social. Certainly we have learned of late that personality is a social and economic entity—even political, if you will; that there is no such thing as a completely isolated individual; that we are literally part of the culture, of the social order in which we live; and that our mental lives and characters and our emotional make-up reflect this great complex of circumstances at every point. It may be that we shall find our clue in a deeper knowledge of the chemistry of the blood, or in a more penetrating understanding of those curious organs called endocrines, which seem to affect our political prejudices, as well as our domestic lives. We are perhaps most conscious of their effects in the case of our relatives. (*Laughter*) But, in any event, I cherish the most optimistic hope for a clarification of all these problems in the next quarter century, and this field is, I believe, the most important area for study and

research. For such a result, you, Mr. Beers, and your colleagues in this movement will have laid many of the most important foundations. You have, therefore, every right to the admiration, respect, and gratitude with which we salute you to-night.

## RECENT DEVELOPMENTS AND FUTURE PLANS

CLARENCE M. HINCKS, M.D.

*General Director, The National Committee for Mental Hygiene*

IT was my privilege to join the staff of the National Committee four years ago. And, coming down from Canada, I entertained high hopes, not only for the future of mental hygiene, but for the Committee as an effective instrument to forward genuine progress. It seemed to me at that time that the United States presented unrivaled opportunities for pioneer work that could influence the rest of the world—pioneer work in the harnessing of science to study the intrinsic nature of man—to lay a solid scientific foundation for an effective psychiatry and mental hygiene. It seemed to me that this country possessed the necessary scientific brains, the necessary money, and, above all, the courage and vision to strike along new paths. And, in regard to the application of scientific facts for prevention and therapy, there appeared to be the promise of active coöperation on the part of medical, educational, social, and religious forces.

After four years in the United States—after five years of national depression—high hopes have remained undimmed. A brief account of a few developments during this period may provide substantial foundation for this optimism.

In 1931 we came to the conclusion that future progress in our field would depend in large measure upon the caliber of available leadership, and we felt that this would be particularly true in regard to medicine and psychiatry. Our Committee, therefore, organized a division, financed by the Commonwealth Fund and the New York Foundation, to study, from the angle of psychological medicine, the medical schools of the country, and to confer with those in charge of policy. As a result, twenty-seven out of sixty leading schools of the

United States and Canada have improved their arrangements for undergraduate training. Of significance on the postgraduate level, there has ensued the organization of a national examining board, so that in future men and women who wish to practice psychiatry will be required to subject themselves to thorough training.

A second development has been in regard to research. During the last four years there has been a growing hunger on the part of individuals and organizations for fundamental knowledge pertaining to human behavior. It is being realized that governmental policy in institutional psychiatry has been shortsighted. We have been spending over two hundred million dollars of tax-collected money per annum to hospitalize the insane, and less than a million for research to discover the nature of our problems. This would be considered an intolerable state of affairs if physical health were the issue.

This challenge for research in our field is being faced today by such bodies as the Rockefeller Foundation and the Scottish Rite Masons. Recent reports of the Foundation indicate that more and more attention is being devoted by that great organization to the fundamental sciences upon which an effective psychiatry and mental hygiene must rest. And the Scottish Rite Masons of the Northern Jurisdiction of the United States are financing the National Committee in an investigation of the possibilities for research in *dementia praecox*.

Another recent development of significance relates to coöperative endeavor between psychiatrists and educators for the conservation of the mental health of school children. I will mention only one project of interest. A few weeks ago the Carnegie Corporation of New York made a grant to our Committee for a study of the problems connected with the selection and mental-hygiene training of teachers for our elementary and secondary schools. We look upon this assignment as important because of our conviction that by affecting the quality of the teaching profession in this country, we will affect the adjustment and mental health of children.

A word about future plans of the National Committee. Here are some of our hopes: that we can continue to provide a national bureau for reliable information in mental-hygiene matters; that we can continue to give an impetus to research

and the training of leaders throughout the country; that we can continue to act as a liaison agency between the general public and scientific leaders—remembering that advance in our field depends upon enlightened public support and understanding as well as scientific undertakings. Other hopes for the future include the continuation of coöperative endeavor with the American Psychiatric Association in fostering the improvement of psychiatric facilities throughout the country; the development of statesmanship in mental hygiene by drawing upon the best brains of the nation; and the making, during the next few years, of as close contacts with educators as we have made in the past with psychiatrists, because team play between educators and psychiatrists may lead to important contributions. Above all I look to the day when the National Committee will act as a force to push mental hygiene beyond the purely clinical approach to an emphasis upon the circumstances of the living of our people—to an emphasis upon the very structure of our civilization. If we as a country are being committed to a new era of social planning, then let us keep in mind mental-health values as well as other values.

In conclusion, I want to say that whatever success the National Committee may have in the days to come will depend upon our friends. You here to-night constitute a magnificent sampling of our friends. With your continued help we can approach the future with confidence, and we will be able to bring to fruition many of the dreams that Clifford Beers had twenty-five years ago.

## MENTAL HYGIENE AND PUBLIC HEALTH

M. J. ROSENAU, M.D.

*Professor of Preventive Medicine and Hygiene, Harvard Medical School*

PHILIPPE PINEL, more than a century ago, struck the shackles from the insane and opened the doors of asylums. Clifford Beers, a quarter of a century ago, advanced the humane care and treatment of the mentally diseased. He did more than this, for he started, organized, and inspired the mental-hygiene movement. Here is also the appropriate time and place to recall the name and services of



Dr. Thomas W. Salmon, who worked with him as the first medical executive of the National Committee.

Mental hygiene is a large and important chapter in the book of preventive medicine. It is a newcomer and has not yet found its place in public-health procedures. I prophesy that when we know more about it, mental hygiene will take an abiding place in organized health activities. Mental hygiene has breadth and depth. It is diffuse and rubs elbows with almost all human activities. It is especially a connecting link between public health and social welfare.

It has become a twice-told tale to recount the triumphs of preventive medicine, such as the control of typhoid fever, tuberculosis, diphtheria, yellow fever, and many other infections. These are material gains that make life longer and surer; but longevity in itself is a poor index of the goal in view. There is little use in living longer unless we can live better. The real object of longevity should be to give greater opportunity for service in the world; in other words, we are thinking not so much in terms of material success as of opportunity for spiritual progress. Hence I think the next step is mental and moral hygiene.

If I understand mental hygiene correctly, it does not consist simply in preventing damage to the brain and in avoiding disorders of the mind, but concerns itself more particularly with the most difficult and complex problem of progress—namely, attaining and maintaining a sound mind. The ultimate object of health is a positive quality that must encompass the whole man, which includes his physical, mental, and spiritual make-up. The ultimate in mental hygiene means mental poise, calm judgment, and an understanding of leadership and fellowship—in other words, coöperation, with an attitude that tempers justice with mercy and humility. The sum total of all these qualities is ordinarily called common sense, which is the quintessence of mental health. If some of this could be achieved, first in more individuals and then as a group psychology, it would not only increase individual happiness and the joy of life, but would give greater stability to our institutions and cure many of the present ills of society. With a community enjoying mental health, civilization would advance with a firmer step. It would contribute to the achievement of social justice. It would help soften depressions such

as we are now in, and as a climax would furnish the good will and the good sense to avoid war and achieve peace.

A troubled world is one that is mentally sick. In order to prevent and cure these disorders in the individual as well as in society, we must know more about the mind and its workings. It is an axiom in preventive medicine that success with a disease depends upon our knowledge of that disease. In order to have a sound program for mental hygiene, we must know more about the structure and function of the mind, its relation to the body and the causes of abnormal behavior. The fundamental step in the program is, therefore, study and investigation that will bring us the knowledge on which to base a sound program of procedure. I, therefore, want to emphasize the appeal for encouragement and support of researches that will give us this firm footing, without which we are apt to flounder and allow the subject to be ruled by fads and fancies. I know of no field in which the harvest will yield greater benefits to mankind.

### THE CAUSE

JACOB GOULD SCHURMAN, LL.D.

*Former President of Cornell University; former Ambassador to Germany*

I OWE the pleasure of attending this dinner to the circumstance that I was one of twelve persons who, at the summons and under the inspiration and guidance of Clifford Beers, met in this city in 1909 to organize a body which was designated The National Committee for Mental Hygiene. The name was, it must be confessed, a somewhat ambitious one, prophetic rather than realistic, but all the same correctly descriptive of the purpose and object of the confident and enthusiastic leader. Surrounding him I found a little band of supporters and disciples, some of whom you see here this evening. The complete list of names, however, is so short that I will mention the others: Professor William James, Professor Russell H. Chittenden, Dr. Adolf Meyer, Dr. Frederick Peterson, Dr. Lewellys F. Barker, Miss Julia Lathrop, Horace Fletcher, Dr. August Hoch, Marcus M. Marks, and the Reverend Anson Phelps Stokes, Jr.

The faith of Mr. Beers and his associates has been gloriously vindicated by the large growth and the rich fruit of the experimental germ so inconspicuously planted on this seemingly barren soil only twenty-five years ago. It is another illustration of the everlasting truth that faith and hope have a way of realizing themselves; they overcome obstacles, they remove mountains, they create inexhaustible energy and life.

It was at that meeting that I first saw Clifford Beers. But I had already read, before publication, and while it was still in page proof, his autobiography, *A Mind that Found Itself*, and had been deeply moved by its vivid descriptions of the sufferings and tortures which patients in our "insane asylums," as they were then called, were doomed to undergo, and which the writer himself had actually endured. He had come through it all triumphant. And, wonder of wonders, he retained a clear recollection, not merely of what went on in the hospital wards, but also of his own perverted mental processes, and of the misinterpretations to which they gave rise, as well as the cruelties and brutalities that, in consequence, were inflicted upon him by his keepers. But at that very time, in that very Inferno itself, he conceived the idea of reform, and vowed to dedicate his life, as soon as his recovery might be complete, to the cause of the improvement of the care and treatment of the mentally afflicted, to which, as you know, he later added the amelioration of social conditions affecting mental health and mental integrity.

When he returned to the world of normal affairs, Mr. Beers did not forget either his own sufferings or his vows of self-dedication to humanitarian reform or the cruel and inhuman practices which then so widely prevailed in our "insane asylums." On the contrary, he laid them before the public in an extraordinary book. Experiences that most sufferers would have left "to silence and oblivion" are in that classic work openly set forth and used for the permanent benefit of mankind. I wrote Mr. Beers immediately upon completing the reading of his graphic and moving story: "If there is anything like it in the history of literature, I am not acquainted with it. It is a wonderful volume—whether one considers its contents or the circumstances of its origin—and I find it intensely interesting."

We are told that when Dante walked out in Florence, his

fellow citizens used to say, "There's the man who has been in Hell." How else, they intuitively argued, could he have written his descriptions of the torments of the damned as we read them in his immortal poem? Though the great poet's faculty of creative imagination enables him to "body forth the forms of things unknown and give to airy nothing a local habitation and a name," yet for all but the divinely inspired seers it remains true that actual experience is the necessary condition of veracious ideas and correct reporting. Dante could create by force of imagination an Inferno that his eyes had never seen, nor his ears perceived, nor his hands really touched and felt. But Clifford Beers entered into the actual Inferno—he descended into Hell—and for three years he was a denizen of the terrible Kingdom of Unreason. His book is the faithful and intimate record of his experiences and sufferings in that undiscovered country. They had burnt themselves into his very soul, and were never forgotten in any phase of his mental health. Add to this the further facts that he had trained himself in the art of composition by laborious practice, that he undoubtedly also possessed unsuspected literary gifts, and that his writing is characterized throughout by the unmatched eloquence of sincerity, and you will have no difficulty in understanding why *A Mind that Found Itself* not only became a literary classic, but exercised an extraordinary influence in the mitigation of human suffering and the increase of human happiness, as well as in the advancement of the nascent cause of mental hygiene.

We are now commemorating the twenty-fifth anniversary of the founding of The National Committee for Mental Hygiene. In order that you may take away with you a permanent record of the beneficent and far-reaching work of this organization, there has been printed in the program of this celebration a synopsis of its operations in admirably classified form, showing what has been done on behalf of the mentally ill and the mentally deficient, as well as for children manifesting peculiar behavior or disorders of personality. This exhibit shows also the work of the Committee in promoting the training of experts in psychiatry and mental hygiene and in educating the public to an understanding of the nature and importance of the subject itself, and emphasizes the necessity of suitable and well supported institutions

for the control and prevention of mental disorders. You will note, too, how the National Committee has coöperated with other agencies of reform and betterment in the establishment of national, international, state, and local organizations devoted to the cause of mental hygiene. During the Great War the Committee also coöperated with the Surgeon-General of the Army, with the result that the army was freer from mental disorders than any other in American history. And afterwards the Committee continued its coöperation with government agencies in working out the problem of a national program of hospitalization for mentally disabled veterans of the war.

I have merely adverted in the briefest possible terms to the work of The National Committee for Mental Hygiene during the past twenty-five years. When you read the synopsis printed with the souvenir program, you will stand amazed at the variety and importance of the results that have been achieved. Scientists, physicians, especially psychiatrists and public-health officers, are, no doubt, most competent to assess their value. But a layman has his own reactions, and I venture to express two or three reflections which force themselves upon my mind.

In the first place, I think a revolutionary and most beneficent change has taken place in the attitude of the public toward mental diseases; and while I would not claim for Mr. Beers and his associates the entire credit for that change, I do feel that they are entitled to a considerable portion of it. A generation ago people who were called "insane" were regarded, not as sufferers from disease, but as objects of obsession: they were supposed to be actuated by some unnatural power or influence. To-day mental disorders have been assimilated to the category of bodily disorders. Both are diseases due to natural causes, physical or psychical.

Secondly, this new conception of the nature of abnormal mental affections has led to a corresponding change in the care and treatment of mental sufferers. Instead of "insane asylums," we now have mental hospitals. The use of forcible restraint has been reduced to a minimum, and the psychiatrist and many general practitioners now give to mental sufferers the scientific treatment that has long been available to those suffering from so-called physical disorders.



Thirdly, the belief that insanity was an obsession was attended by the belief that it was incurable. But if mental disorders are due to natural causation, then the removal of the cause produces the cancellation of the effect—that is, it entails recovery from disease and restoration to health. Thus the new conception of mental disorders has created and diffused in hospitals and homes hope where formerly despair reigned supreme.

Ladies and gentlemen, I think you will desire to join me in extending sincere and cordial felicitations to The National Committee for Mental Hygiene on the good works in which it has abounded for the quarter century of its existence. For my own part, the record evokes both admiration and astonishment. Since the organization meeting in 1909, I have lived about half the time on other continents of the globe, and that fact, in combination with other circumstances, has made it impossible for me to keep in touch with the activities, struggles, and achievements of the National Committee. I rejoice after so long an absence to meet with its members again, and as a detached, but interested observer, to tell them face to face how highly I rate the great work they have done and how deeply I feel its importance for the welfare and happiness of mankind.

There is one special feature of this matter which I cannot forbear mentioning, the more so as it is often overlooked. We glory in the discoveries of modern science, but we are apt to forget that they have to do almost exclusively with the physical universe. From the reproach of neglecting the vast and vital field of mental phenomena, science has in the last decades been redeemed by the investigations of psychologists, psychiatrists, and workers in the field of mental hygiene. The poet may be wrong in saying that "the proper study of mankind is Man," for the dictum seems to exclude the study of nature, or to relegate it to a position of inferiority. But the poet is right if he means that mental phenomena are not less important than physical phenomena as objects of scientific research. Investigate nature, by all means; but investigate Man also—Man, not only as body, but as mind, and mind not only in its normal, but also in its abnormal manifestations and activities.

There is one penalty, and a grievous one, that I pay for

long disconnection with this National Committee. I mean that I am not acquainted with the workers in the field. I hope they will not consider me lacking in appreciation of their services when I say that my mind goes back to the little group who came together at the organization meeting in 1909. Huxley once said that, while it was true that there is wisdom in a multitude of counselors, it is generally found in one head. In that first meeting the fountainhead of our wisdom, as also of our inspiration and hope, was Clifford Beers. I have always regarded him, therefore, not only as the founder of the mental-hygiene movement, but, as it were, the cause itself personified. In the new book entitled, "*Twenty-five Years After—Sidelights on the Mental Hygiene Movement and its Founder*," edited by Dr. Wilbur L. Cross and dedicated to the memory of Dr. William H. Welch, which I have read with deep interest, I am happy to find that this view is not peculiar to any one individual, but that it is shared by representative leaders in all lines of American life and thought and creed, and by leaders in almost all other countries as well.

What a career Clifford Beers has had! He surely, of all men, is "the happy warrior." From the nadir of human life he has been moving steadily toward its zenith. He has "hitched his wagon to a star." 'Tis great causes that ennoble men and render them illustrious. Not only has Clifford Beers devoted himself heart and soul to one of the highest and noblest of humanitarian reforms, but it was he himself who in early manhood conceived that cause, and who in the years that followed, by the exercise of rare qualities of heart and mind and will, drew into coöperation with himself for its realization hosts of men and women in America and throughout the world.

You say that my subject is "The Cause." Ladies and gentlemen, I present to you THE CAUSE—Clifford W. Beers!

## SOME INTIMATE REMARKS

CLIFFORD W. BEERS

*Author of "A Mind That Found Itself"; Founder of the  
Mental Hygiene Movement.*

MR. Chairman, Ladies and Gentlemen: The subject of my talk to-night, at this 25th Anniversary Dinner of The National Committee for Mental Hygiene, is: "Some Intimate Remarks"—and they *will* be intimate. The watch now says that it is twenty-five minutes to eleven. You, as a group, were fifteen minutes late in coming to this party, so it's only twenty minutes past ten and we are now only ten minutes behind schedule. Some one has suggested—never mind who—that I should be given one minute for each of the twenty-five years that have passed. If I take them, it will be eleven o'clock for you! I wish to say now that those who have to catch trains can walk out on me. No old friends or relatives are allowed to leave until this party is over; and my inspiring friend, the rector of St. George's Church, down there in front of me, can't go until I let him go. I have sat under him many times and couldn't get out! (*Laughter*)

On the seating list—I must square this at once—is that embarrassing error in the listing of my name on the inside of the front cover which caused President Angell facetiously to refer to me as "Doctor." After I had read all the printer's proof of everything issued in connection with this dinner, except the proof of the guest list which was read late last night by my very able assistant, when she was tired—and I am very glad she *was* tired, because I have been trying for a month to catch her in an error—that typographical error escaped notice. She it was who put "Doctor" Beers on the dais (*Laughter*) instead of "Mister," as I wrote it on the original copy that went to the printer. This error reminds me of a statement made by my great friend and helper, William James—one of whose sons, I am glad to say, is here to-night—who in the early years of my work sent me a letter addressed as "Doctor" Beers, and then wrote on the back of it: "I discover that I have inadvertently addressed you as

'Doctor.' Let it stand. You are better than a doctor.'" (*Laughter*) And that's the reputation I wish to preserve. This is beginning to wreck it—and I don't like it! (*Laughter*)

President Angell told you in a humorous way of his nervousness to-night while sitting on the dais between Dr. Meyer and Dr. Ruggles, two psychiatrists who, for all he knew, were examining into his mental condition. Now letting only *two* psychiatrists do that is perhaps dangerous—one might say he was all right, the other might say he wasn't, and that would not be too comfortable. I chose a wiser method when I began my work. I dealt with groups of psychiatrists who, as you all know, never could have agreed (*Laughter*) had my state of mind been brought in question—and I should have received the benefit of all doubts. Another reason why I surrounded myself with psychiatrists (and I think highly of them, for the success of this work is based on their contributions to it) is that after coming out into the world as a recovered patient, or supposedly recovered one, I thought the safest thing that I could do was to work with as many of them around me as possible so that I would appear normal under *all* circumstances. (*Prolonged laughter*)

I wish to say right now that this will be a very disorderly speech so far as the order in which I present my ideas is concerned, because, as you know, I am speaking extemporaneously.

Recently one of the sensational New York newspapers has been telling the public that during the past ten years some thirty-five thousand "madmen" and potential criminals have been discharged from the New York State Hospitals. Such a statement is very unfair. Though there are certain kinds of mentally disordered persons who should not be set free in the community, and seldom knowingly are, except when circumstances beyond the control of the hospital officials compel such action, the percentage of patients discharged from mental hospitals as cured or "improved," not only in this state, but throughout the country, who are likely to commit overt acts or crimes, would, I am sure, be found to be surprisingly small if there were any accurate statistics available on this subject. I think the danger is not from the people who have come out of the mental hospitals, but the ones who are not in there yet! (*Laughter*) And in saying this I am not refer-

ring to the group in this room to-night! (*More laughter*) The fact is, that until the mental-hygiene movement is so highly developed that we get a sort of mental-hygiene filter through which everyone must, as it were, be passed, so that potentially dangerous persons can be discovered promptly, spectacular crimes will continue to be committed by persons who should have been placed in an institution earlier.

As I sat here to-night, I couldn't help thinking that you in the audience must be wondering how I was feeling while Dr. Schurman was introducing me in such an intimate way. As a result of all this work, I have developed a high degree of objectivity. There is no question about it. His remarks did not bother me *at all*. I had a mental breakdown, but that, to my mind, was the equivalent of any of the physical breakdowns that people accept with equanimity. I am not conscious any longer of ever having had a mental breakdown because I have been so frank about it. I have completely divorced myself from those experiences, so far as any feeling on my own part goes.

But that wasn't true in the beginning. I can look back to the time when my book appeared, when I came on the scene, as it were, and without making too much of a comparison between Lindbergh and myself, much as he did—*overnight*. I had full pages in the New York papers and the papers of my native city, New Haven, which, so far as I could, I edited (*Laughter*)—to keep them from being too sensational. Of course, they had a right at that time to play up all the sensational stuff in my book. Shortly afterwards, William James wrote me again and said, "Your work will begin to produce results after the newspapers have forgotten you." Well, I don't want them to forget me entirely, because when they write about me, you learn about the cause, and we have a right to all publicity—but I have never cared about publicity, as such. I remember distinctly a later article that appeared in the *New Haven Evening Register*, something about my book, with its title, *A Mind That Found Itself*, at the head of the column, and after it, instead of having a period, it had a question mark. And that typographical error *bothered me!* (*Prolonged laughter*) For a number of years I felt sensitive about my experiences and I was at times conscious of being "looked at" by some of my fellow townsmen, and I know



that some people, before the book was out, felt that I should go back for more treatment. I heard gossip to that effect. It only spurred me on.

After the book was out and I said I was going to start this national movement and the international movement, again my sanity was brought under suspicion. The trouble was, all of my plans were seemingly delusions of grandeur. And I have spent a good share of my time since making my delusions of grandeur come true, and embarrassing those who thought they wouldn't. I started on that plane. Nothing has happened—I couldn't see all that *would* happen—but nothing has happened that has surprised me in the least. I knew when I was writing my book that it was a *good* book (*Laughter*) and it proved to be much better than I thought it was going to be. (*More laughter*) And I knew this movement would go around the world, just as I said it would in the statement I wrote at the Yale Club, in 1905, which appears, in part, in my book. I don't know my book by heart, of course, but I know this phrase: "Whether I am a tool of God or a toy of the devil, I do not know." But I said this thing would go around the world. And it *has*.

As to the absorbing of praise—you probably won't believe me—but the new book that Dr. Schurman has referred to: *Twenty-Five Years After—Sidelights on the Mental Hygiene Movement and its Founder*, which contains nearly five hundred twenty-fifth anniversary tributes from all over the world, thrilled me up to a certain point. Beyond that I couldn't get any reaction. I really haven't for some months gotten a reaction out of any of them because there is a limit to taking up praise and absorbing it, just as one bouquet of flowers is as good as fifty—one doesn't want too many at once. Another thing about the praise given me: I am now so completely identified with the cause, in my own mind, that all you say about me is gratefully received and what I can't absorb and use at the moment I pass over to that astral body of mine and store it away—and on dull days I draw some of it back. (*Laughter*) My book came from the heart. I think that's admitted. And words that come from the heart do not affect the head—it's only when you use the lungs too much and too often, and only the lungs! (*Prolonged laughter*)

There is a good deal of curiosity about why I stuck to my

resolution to write my book and carry my plans through. I, too, have often wondered why, because before my mental breakdown, and as my story relates, I was terrifically sensitive because a brother of mine developed epilepsy. I thought it was a family disgrace and I was afraid he would be found on the street in an attack of epilepsy. Yet a few years later, I broke down mentally and came out and wrote a book telling the world about it. Now I can't figure *that* out.

As to the impulse to carry through, there were, no doubt certain traits in my character that enabled me to do it. But only recently, after more than twenty-five years, with the help of one or two who know me pretty well, have I diagnosed this and found what seems to me to be the reason. I have a tremendous reaction to unfairness and injustice—whether I am the victim or someone else—and I immediately go into action, and I *stay* in action. Why I do this was made plain to me by a statement of Emerson's which came to my attention recently. I can't quote it verbatim; I never know anything verbatim—I don't know that I know much of anything anyway! (*Laughter*) This statement of Emerson's, used by him in 1838 in an address before the graduating class of the Divinity College at Harvard, as it was then called, which was recently quoted in a newspaper report of a sermon by the Reverend Dr. Harry Emerson Fosdick, went something like this: Dr. Fosdick was complaining of the lack of fiber in the young manhood of America and said that he felt as Emerson did when he referred to "the need for men who rise refreshed in the presence of a threat and who welcome a crisis."

I had never before realized just why I was able to stay so long in any contest, but when the National Committee's life and safety are threatened, I go into action automatically and I stay in action because the threat refreshes me. I can also say that I welcome a crisis—if we must have them. I have sat in the office of our National Committee when we didn't know how we could pay the bills, and other people were getting panicky, when I have said, "The crisis isn't bad enough yet. We have got to wait a while. (*Laughter*) We've got to wait until we haven't got *any* money." (*Laughter*) Then I get eloquent and I get very active and dynamic, and thus far all these crises have been met. Now I don't mean that all the money that has been raised for the National Com-

mittee has been raised by *me*. The bulk of it has been secured from Funds and Foundations by others, but I have been the "pinch hitter," as it were, in regard to individuals in all these crises—and there are persons here to-night who know all about that! (*Laughter*)

To change the subject: A year ago last summer, I found a hobby which at last interests me. Fortunately it is a noiseless hobby. You wouldn't think I would like a noiseless hobby. (*Laughter*) It was oil painting. Some of you will recall that I told in my book about a very intense interest in drawing which came to the surface during my period of elation while in the hospital. One of my delusions of grandeur at that time was that I was destined to be a great artist and, as some of you know, it was the tearing up of some of my cherished drawings by unfeeling attendants which led to the fight that resulted in my being placed in a strait-jacket, and in a padded cell, and treated with great brutality and injustice. You might say that my artistic impulse was the cause of my being put in the padded cell and experiencing the things that made me stay on this job. But the strange thing was that I never did any drawing again for twenty years after leaving the hospital. That part of my personality wasn't ready to express itself, which was fortunate because, had I been allowed to develop the art impulse at that time—there was then no occupational therapy in the hospitals—I undoubtedly would have chosen art as my career. You can always get a job in the field of art—if somebody will feed and clothe you. (*Laughter*) So I would have been an artist and I might have starved to death by this time, but I would not have written a book. I would have given up all thought of it for the reason that I would not have had the experiences that put me in the mood to do it.

So, two summers ago, I began to paint, without any instruction. I claim I do it with my solar plexus, because that protects my feelings when anybody doesn't like my pictures. But I *have* turned out half a dozen or a dozen that are not so bad. Some people say they would like to own one of them. But my pictures cannot really be bought. I might say they can't be sold! (*Hearty laughter*) The only people who can get them are those who make substantial contributions to the work. (*Laughter*) I know of one of my nine by twelve inch

paintings—and I won't be too specific because I don't want to cause embarrassment to someone who is here to-night—but that one has, in effect, been sold for \$100,000. That is about one thousand dollars a square inch! And I hope to get some new orders like that! (*Laughter*)

Having rested your minds with a rather fanciful account of my rare ability as an artist, I shall now speak more seriously. A very important part of the success of our work and the basis of its success was the bringing of the lay group together with the medical group—not only the psychiatrists, but physicians in other parts of the profession. The psychiatrists alone couldn't have had a mental-hygiene movement, and, of course, the laymen alone couldn't. No, the safety of the whole movement and of the National Committee lies in keeping that medical-lay element prominent in the work, and in having on the lay side, when I am no longer active in it, some one with my sweet-tempered persistency (*Laughter*) who will see that the lay end is protected against the medical end, and the doctors will need a good man there, too, to see that their interests are protected. (*Laughter*)

This talk is scrappy as you see, but it will be revised before it is published, so I am not worrying about *that*. (*Laughter*) And it will be so well revised that there may be some things in it that you haven't heard to-night! (*More laughter*)

The National Committee has been under criticism on a number of occasions because it has not taken a definite public stand on certain controversial subjects. Now, I will tell you—and this is not after consultation with members of our inner committees, for I am not laying down policies—what I think the National Committee should do about birth control, sterilization, and psychoanalysis, for instance, three very controversial subjects. Well, the National Committee is not a medical society. It is not a scientific society. It has in it people who are for or against all those things. In this room to-night, if there were not a law in this State against carrying guns, we could have on a small scale as good a revolution as you ever saw. (*Laughter*) We have people here who don't get together much unless they do it under the mental hygiene banner; and I want to see the National Committee a sort of sanctuary for all these people, where ideas for and against these things can be expressed, and then let them use in the

work of their own special organizations the information gained in open discussion. In other words, I should like to see our National Committee and the mental-hygiene movement as a whole serve as a sort of Switzerland, in the field of social welfare, health work, and related activities. I know of nothing that would be more fatal to the future success of our National Committee than for it to take official action, approving or disapproving of any given controversial subject as important as that of sterilization, birth control, or psychoanalysis, and I know of many who agree with me on this point.

As to the financial aspects of our work: On such an occasion as this our National Committee inevitably looks very prosperous. It *has* been very fortunate because, during the past twenty-five years, it has raised and expended approximately \$3,300,000—a pretty good dividend on the ten thousand dollars that I so willingly borrowed from others in the early years to get the work started, money fortunately paid back later. But the time has come when our National Committee needs and must have stabilized financial support. During the very first year of its work an appeal for an endowment of \$1,000,000 was submitted to the representatives of a certain man of great wealth, before certain great Foundations were established. The appeal, a wonderfully written statement by William James, prepared at a time, too, when he was no longer well and when such effort, as he told me later, exhausted him, never reached the philanthropist to whom it was addressed and did not receive favorable action by his appointed almoners. I am now glad that we didn't get that million-dollar endowment when the work began, because I have had all the fun of fighting during the recurrent crises that have occurred. (I notice that the warning light which has been flashed on previous speakers has now been turned on me. It happens to be a red light, meaning that I should stop, but, of course, on this occasion I am color blind and that light means nothing to me at the moment. [Laughter] I am not, however, going to talk much longer.) But the time has come when we need the equivalent of an income from at least a million dollars, because, almost every year since the work began, we have had to start the next year's work almost from scratch. Without stabilized financial support and an



adequate minimum income, it is, of course, impossible to attract to the staff the type of people who should be on it, unless they happen to be possessed of the pioneer spirit—something almost all have had who have served on the staff. If we had as a back-log of support an annual income of, say, \$50,000 a year, our National Committee could proceed more safely and more effectively.

One of the most stimulating things about the early years of my work was the widespread disbelief in its probable success. This skepticism was inspiring. To-day, almost everybody seems to believe in the work of the National Committee and I no longer have the stimulus that I used to have before the work was proved a success. For that reason, I am going to mention two new projects, before I am done, which probably will not be taken very seriously to-night, but which in time, will, I am sure, materialize.

A limited number of persons of my acquaintance believe that the mental-hygiene movement and the agencies identified with it have ahead of them an important piece of work to do in relation to peace. It is not my wish that our National Committee should ever become a so-called "peace organization," but I do believe that it can crystallize interest in the mental factors involved in the problem and later, after careful study, make available certain mental-hygiene factors which will enable all of the agencies working for peace to make more progress. In the October, 1933, issue of our quarterly magazine, *MENTAL HYGIENE*, an article entitled, *Peace and International Relations*, appeared. It is a very interesting article, which as soon as it is put into pamphlet form, I intend to send out in the name of The International Committee for Mental Hygiene, in order to get suggestions as to what may best be done in regard to the peace problem by the various mental-hygiene organizations. Something tangible should come out of this.

Since political campaigns come under the general heading of peace and war, it seems appropriate for me to tell a story about Dr. Wilbur L. Cross, who has recently been reelected Governor of Connecticut, and who, I may say, would have been with us to-night had not a previous engagement made it impossible. Now for the story. Some of you have heard it, but not all of you. As Governor, he must visit all state insti-

tutions at least once a year. He went to the Connecticut State Hospital in Middletown, and while there, Dr. Leak, the Superintendent, took him through some of the wards. He said to him, "Now we will go into a ward where the 'disturbed' women are under treatment." Upon entering it, several of the patients came forward and Dr. Leak said to one of the women, "Shake hands with Governor Cross, the first Democrat elected Governor in Connecticut in twenty years." "I'll shake the hand of *no* Democrat," she said. (*Laughter*) Whereupon Governor Cross said to Dr. Leak, "Now I know where the Republican majority in Connecticut has gone to!" (*Prolonged laughter*)

Though I am digressing, let me relate another story told me by Governor Cross, about a minister who preached a sermon at the Connecticut State Hospital some years ago. After the sermon, one of the patients, a man, came up to him and said, "I liked that sermon a lot." "What was there about it that you liked so much?" the minister asked. "I liked the part," he said, "in which you told about mothers in India throwing their babies into the Ganges." "Why did that interest you so much?" "Well," the patient replied, "while you were saying that, I was wondering why your mother didn't throw *you* into the Ganges." (*Laughter*)

Now, I have talked rather rapidly to-night, but I have been very busy lately and when I am busy I get speeded up. I want to get speeded up. My work requires it at times, and as a result of my having broken down and come back, I have an indicator, or thermostat, or whatever you wish to call it, which tells me when I am going too fast. Lately—and it has happened lots of times during the twenty-five years—elevators seem very slow and telephone connections seem unusually slow. Now that is all to the good, because with these warnings all I need is to take a few days off and "cool off." (*Laughter*) I wonder how many of you have such protective measures at your disposal. Some of you overwork; you break down because you don't know what is coming.

As a result of this rapid cerebation that I seem to be bragging about, I used a phrase the other day descriptive of it. I said that we hear much about the need for more streamline trains, but that what we need now, in my opinion, is more streamline brains—brains that get to their objective with less

friction. (*Laughter*) No doubt some of you at the moment must be thinking I am terribly conceited to stand up here and tell you what a wonderful operating machine I have inside my skull. But I will take the conceit out of myself for you in this way: I was once told by a leading psychiatrist in this country that I had the most rapid-working mind he had ever met. And the man who said that was my friend, the late Dr. Walter E. Fernald, the Superintendent of a School for the *Feeble-minded!* (*Prolonged laughter*)

I have already told you that disbelief in an unproved project is stimulating to me. For that reason I wish to bring to your attention an as yet unfulfilled dream which I believe will materialize some day. I think President Angell will recall that ten years ago he and I talked over the feasibility of my plan for creating an International Institute of Mental Hygiene. You remember that, President Angell? (*President Angell said that he did.*) You see, his *memory* is working all right despite anything the psychiatrists on either side of him may say later! (*Laughter*) This projected International Institute of Mental Hygiene is to be similar in some ways and in some of its activities to the International Institute of Agriculture at Rome, which has coördinated the knowledge on agriculture, food production, and plant diseases affecting production, throughout the world. As many of you know, it was founded by David Lubin, after he had failed to get people in this country to see the merit of his plan. That is a great institution in Rome. I visited it in 1927 and gathered useful ideas.

The International Institute of Mental Hygiene which I hope to see established should be housed in a beautiful building, a sort of "Temple to the Human Mind," as it were, with a great library on mental hygiene and related subjects, with all of the statistics and laws of the world relating to our field to be found there, and with all the plans of the best mental hospitals in the world. The projected Institute should be a world clearing house and center for the coördinating of all of the international activities in the field of mental hygiene, with an international magazine printed in various languages—and, of course, with *A Mind That Found Itself* published in all languages! (*Laughter*) In this connection, let me say that my book has already been translated into French in an

unusually satisfactory way, and André Maurois, at my request, has kindly provided a preface for it. This French edition will be published by one of the leading Parisian publishers, at the expense of our American Foundation for Mental Hygiene, when money for this purpose is available.

Speaking of putting my book into various languages reminds me of a statement in a 25th anniversary tribute, written by Dr. Liu, a graduate of Harvard, who is the head of the National Department of Health, in Nanking, China, which appears in the new book, *Twenty-Five Years After*. In that letter he expresses the hope that my autobiography will soon be translated into Chinese—when, of course, I shall read it again! (*Laughter*) He also says: "What we need in this country is a Chinese Beers." (*Laughter*)

The projected International Institute of Mental Hygiene will need for the building, equipment, and endowment a large gift, and the longer it takes me to "sell" the idea, the more it is likely to cost the donor, because plans have a way of elaborating themselves in my mind. As to the place for it, I'd just as soon tell you where I would like to see it established. I hope to live to see the projected International Institute of Mental Hygiene built in New Haven, Connecticut, where the mental-hygiene movement began, not as a monument to me, though it is the only kind of monument I want, but as an indispensable agency in the mental-hygiene movement. Such an Institute, if built in New Haven, should be an independent organization, not related to Yale University, except in a coöperating sense. Nor should it be connected with governments or be subsidized by them, as is the International Institute of Agriculture at Rome. When a donor of the projected Institute is found, he will, in a sense, receive in return for his great gift to humanity a system of international, national, state, and local agencies for mental hygiene, built up during the past twenty-five years, through which such a central International Institute can surely attain its objectives. Unlike David Lubin, I shall not, I am sure, have to go to another country to find the person of wealth and vision who will finance this great project.

In conclusion, may I make a very personal statement? A great many of those associated with me, and also, I believe, of those who view my work from a distance, feel that I work

too hard and that I should now begin to take it easy. It is a fact that I work rather swiftly when I do work, but I am also a mighty good loafer. Indeed, I loaf between individual tasks of the day and thus, I claim, get rested. But I realize that I am approaching a time of life when I should go more slowly in my work and, for that reason, I am planning to return to New Haven, where my wife and I were born, and set up a home there and then spend two or three days a week in New York at my office, instead of every day, as has been my custom for years. I mention this plan of possibly going to live in New Haven again, so that no disturbing rumors about my mental health will be set afloat when I do make the move. Events have proved that I have a tough nervous system and what might be called a tough brain, and I can stand a great deal of work, far more than most people can, and I don't want people to think, when I do slack up a bit, that I am doing it because of any reason other than the one given. If I move to New Haven and have more leisure than has been the case in recent years, possibly I shall paint some more pictures at one hundred thousand dollars apiece! (*Laughter*)

I fear I have not thanked you for coming to this celebration to-night, but I am very grateful to you for coming and helping to make it a success. I have not said all that I should have, especially about the late Dr. Thomas W. Salmon, the first Medical Director of our National Committee, with whom I worked so closely during the first ten years of its activity, and who laid the sound scientific basis for its success. And there are also a great many others to whom I should give credit for the progress that has been made, and to whom, including my wife, I did give credit at the First International Congress—because *too many* people give me *too much* credit for what I have done. But all I can say at this late hour is that it hasn't been a one-man show—except that I was the one man *always* on the job who got the others to do the work! (*Applause*)



## THE BIRTH AND DEVELOPMENT OF THE MENTAL-HYGIENE MOVEMENT

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IT was in the fall of 1907 that I received from our friend Stewart Paton one of his characteristic notes which always create new contacts. In this case he told me that he had advised a protégé of William James to bring me a manuscript that he felt sure would interest me and concerning which I might have some suggestions. Not long after that Clifford Beers appeared with the page proofs of his book, the vivid description of his memories and feelings and some plans for improving the institutional régime by means of legislative committees and through arousing organized public sentiment and effort. Clearly Mr. Beers was a man with a vivid appeal and a fervid devotion to a cause, and with a great human document nearly finished. On many things we saw alike; there were others, perhaps, on which our points of view were somewhat different; but we both felt equally keenly the opportunity of the hour. Active psychiatry and public sentiment seemed to be meeting on the same errand.

Psychiatric research, psychiatric teaching, and psychiatric practice had recently changed the Pathological Institute of the New York State Hospitals, born of interest in autopsies, into a workshop in the service also of the living and of real work with patients. Important things had happened in the years that immediately preceded and followed the opening of the twentieth century. In place of the passive descriptive psychiatry of the older tradition, limited to "insanity" and "asylums," and the mainly prognostic-dogmatic, diagnostic-nosological newer psychiatry of Kraepelin, concerned with classification rather than therapy, a biological, dynamic psychiatry which included the whole of human nature had arisen to pledge itself to research and teaching, based on an interest in daily work with patients. From 1894, interest in child study and education and in the nature of the illness rather than in mere dry symptomatology and statistics of disease

terms, and from 1903 active connection with teachers, schools, and homes, had come to give life value to the patients' histories. From 1905, instead of the mere eleemosynary charity for after-care then recommended by Miss Louisa Lee Schuyler, psychiatry had introduced active social work for the patient and his family while the patient was still in hospital and after; and organized recreation and occupation, instead of employment in mere ward and factory work, had become an essential part of the treatment on Ward's Island. And now came the voice of the sensitized layman, destined to bring physician, patient, and the public together and, with its appeal for humane treatment and a fair deal, to contribute a strong and vital impetus. Faith in the good will of hospital workers, and grave disappointment with the usually uninformed and often sensational attempts at public investigations and detrimental legislation, had made us eager for a positive, constructive program, with mental hygiene and mental health as a leading concept. To this end, the untiring and unswerving determination of Mr. Beers brought together a representative body of men and women, who first met officially February 19, 1909, at the old Hotel Manhattan, in New York City.

It was a small, but inspiring and inspired gathering that to-night's occasion leads me to look back upon. We had the presence and endorsement of Frederick Peterson, William James, President Schurman, Julia Lathrop, Horace Fletcher, Anson Phelps Stokes, Russell Henry Chittenden, Lewellys F. Barker, August Hoch, and Marcus M. Marks. They stood behind a judicious and truly workable program for a National Committee, to supplement the front-line work of state societies, which were to bring the public and the workers into live collaboration.

I wish you could all have before you the material that appears in the report of that first meeting. Among the aims proposed were: coöperation with the usually well-intentioned, but poorly supported hospitals (not invidious investigations and further unsettling of public confidence, but whole-hearted assistance); study of the patients and the personal and social factors responsible for their diseases, outside as well as in hospitals; sound after-care, and proper attention preceding hospitalization; the development of sound public attitudes and the provision of reliable information as to where those in

need could go to get help; the interesting of existing health departments in mental health in schools and at large; and the promotion of intelligent legislation, removing false and unnecessary humiliations.

In the light of current experience, it was not very difficult to see what would be the greatest obstacles to be encountered: (1) the dogmatism and air of proprietorship toward everything mental of church and school and university faculties, holding the human part of human nature in their grasp as the "humanities" in contrast to mere "natural science," claiming to know from tradition and revelation all that is worth knowing about man and his life (without adequate concern for biology), and often posing as the sole and only source of any real "idealism"; or (2) the equally rigid professionalized dogmatism of medicine and natural science, which had been allowed to go the way of mechanistic materialism and elementalism, orthodox and extolled so long as it left the mind and soul and behavior to philosophy and religion. A rigid professionalism might allow medical leaders to lend their prestige as humanitarians to the cause of Mr. Beers, but would permit only a timid support to practical investigation and public instruction and research and demonstration how to live and how to include mental health in a study of health, happiness, and efficiency. It looked as if an active stand in public would surely be stamped as self-advertisement or undignified. But really the main difficulty lay in an official agnosticism as to how to fit mind into what these medical leaders had learned and thought of as science in medical school. Actually our entry upon work with the public schools was delayed by fear of encroachment upon the field of moral teaching and denominationalism. The core of the new movement—respect for and practical interest in the whole, undivided live human being—had still to be assimilated, to take the place of the traditional dualism of mind and matter, or the tripartition into mind, body, and soul, with its confusing division of interest and of labor and training.

With this went an actual aversion to giving any serious attention to insanity as disease. I remember my distress, at the opening of our world-famous institute for preventive medical research on May 11, 1906—that monumental institute to be devoted to the study of the devastating ills of man-

kind—that no single reference was made and no status given either to the nervous system or to mental disease. Apparently there was a sincere unawareness of the fact that more hospital beds are maintained at public cost for mentally sick patients than for all other patients together, and equal unconcern and ingratitude for the often heroic and self-effacing work carried on in spite of the unblushing discrimination against the illnesses classed as insanity.

Somehow the medical advisers of the great humanitarian powers were the most difficult agencies to win over to a new and fair deal for the health of the human mind as the health of human life. It seemed impossible to get support for more than the humanitarian side of the problem. I say this not with any sense of blame. This is the apparently inevitable course of slow evolution and conservatism—the price we have to pay for stability. Man was and is the last object or subject to surrender to objective science because thereby man has to surrender himself, not merely the child and the delinquent and the sick.

There was at the outset of the National Committee's work quite a question whether the truly serious work in the field would be able to keep pace with the demands of the lay movement for direction and guidance and its eagerness to turn from tradition and mere revelation to real experience, and whether the steadily growing desire for more knowledge was to be fed from sources of sound practice and research and teaching or largely from a flood of propaganda. There was a serious question whether an emphasis on lay development and lay organization would help or prejudice the needed reform in scientific quarters.

A middle road, with lay work as well as professional work, was decided upon.

Without waiting for perfection, with experience gathered in the front line, in a Connecticut State Society, there blossomed a local development, with Mr. Beers as the active promoter for the lay organization and its work with the community and at the university. Through Dr. William L. Russell, a member of the National Committee, Dr. Thomas W. Salmon became its medical director and started with a series of stimulating surveys of the care of the insane or mentally deficient in a number of states. When the Great

War came, it was again through Dr. Salmon that the unexpected calamity found the United States prepared to give a neuropsychiatric service to its army such as no other nation had provided. It was the war also that gave an opening to psychology, though still largely for its intelligence tests and not as yet in a clearly defined relationship to a health and efficiency service and to modern medicine generally. In the meantime (especially from 1921) the old interest in the child was revived (as a continuation of Mrs. W. F. Dummer's and Dr. Healy's work on the juvenile delinquent rather than of an expensive university experiment) and there arose the child-guidance movement.

But still there was something missing at the core. It had so far been impossible to secure the endorsement of science, medical and general, for the support of model institutes of mental hygiene such as would really represent an interest in all phases of mental health and its promotion in the young and the old and in the most active period, that of the adult. Even Dr. Salmon came from a conference with the medical advisers of the great philanthropists without real support for a program of investigation, and was soon drawn into unimpeded practical work.

*Proc.* If science does not see that the time has come to recognize as its central concern the whole of man, as individual and group, it fails to do justice to its greatest task and opportunity. In its laboratories science has the privilege of following its own vision and goals. But the attempt to legislate man out of its purview because the study of man requires respect for facts not in the common stock-in-trade will not overawe us much longer. We cannot distract human interest from man indefinitely by arbitrary segregation of mind and body and soul, and by an unfavorable division of labor among the various "faculties." We are quite sure that man undissected is more real and more important to us than the paradox of a divided individual. We are more inclined to focus and train our methods on our facts as the facts need them, instead of trimming our facts to suit mere methods. Any truly human study of man will always include life history and situation as well as function of structure and function of function.

Our School of Hygiene of The Johns Hopkins University



received no active department of Mental Hygiene in 1919 because neither the study of the available psychologies nor interest in behavior had a recognized place among the medical sciences. This was not a surprise to those who devote themselves to the modernization of practical and research and teaching work in the field. It always had been comparatively easy to stir the unsophisticated, but not the dogmatists of psychology and philosophy and religion, on the one hand, and, on the other, the equally dogmatic co-workers in the natural sciences and medicine, with their traditional Pharisaical alibi that the psychiatric domain had not as yet reached a scientific status justifying support of its work—as if somehow science had to precede common sense, and as if people had to learn to swim before being trusted in the water—indeed, as if nothing had ever been done that could have reached the judges! We may frankly claim that what sense the sciences have begun to show in our field came from the spreading of our common sense and not often from importations of ready-made science developed for other problems, and also that orthodox natural-history study rarely works with man as he actually lives. To be scientific, one had to leave out whole domains of human nature. Sex and psychoanalysis somehow forced their way in, exploited in popularizing literature; but the large controlling factors of man and the historical organization of man's nature and life had to be forced into a statistical-mechanistic pattern, as if it should be kept from showing, as part of his real nature, man's actual human nature, including his idealism and religious urges and attainments.

The same difficulty showed in the relation of our movement to the three big scientific advisory national bodies. Mental hygiene fell down between the National Research Council, the Social Science Research Council, and the Council of the Learned Societies. Owing to traditional prearranged divisions of labor and concepts, neither of the three opened the door of active support and participation and cultivation of the ground. Only a few of the official leaders could be interested, at the most sentimentally or somehow personally, in the whole of man and in the frank demand that we change the arbitrary dogma of science and study man with and as a living soul and full-souled body, as the center of research

and concern, as a true unit or real individual, as such and in groups, however deplorably shunned or kept apart in the plannings of the older traditions; for after all man is the most important issue that civilization of to-day should consider its concern, if we are to make the grade from a lapse into chaos to a livable society.

It was in the home city of the first state society for mental hygiene, and of Mr. Beers, that there came a first move in the direction of an Institute of Human Relations—or Human Realities, bringing at last under one roof those who work with man in individual and social life and those who are concerned with his nervous and mental equipment.

We may well be delighted, at the beginning of our second quarter century, with the evidences that the direction of planning for mental hygiene has begun frankly to be put in the hands of those who are doing actual work in the field, instead of being left too largely to concepts of the past and to those trained in a mind-shy science, or to just any plausible propagandists. We start on a second quarter century with new zest and new goals and growing understanding in both the humanities and the objective sciences. New leaders realize that neither one-sided verbose idealism nor false traditional standards of science should continue to hinder the study of man as part of nature. They no longer consider the study of nature as complete when all the sap of spiritual reality and vital biological meaning is ignored in a mechanistic-statistical dogmatism or withdrawn into unassimilated supernaturalism. We cannot so divide human nature. Our souls have bodies and our bodies have souls—or should we not rather say: Our souls are live bodies, and our lives are our souls?

We have to-day a clear vision of real centers of sound, exemplary work in the rank and file of practice, research, and teaching, and not only in one or another field of limited exploitation. It may be all to the good to pounce on the helpless child and the delinquent and to hammer away at the imperfections of distraught mothers, to report glibly on “successes” which really can be properly evaluated only twenty-five years from now. But certainly we sorely need a scrutiny also of adult life, of the morale of the relations of science and spirituality; a getting away from mere reitera-

tion of uninformed pessimism and smart derision of all planned effort to a phase of more justified planning, of well-directed energy and practical demonstration; faith in well-considered action instead of mere talk; a cultivation of sound economics, growing through new deal and experimentation into a truly and whole-heartedly fair deal, in which credit will receive the full corrected meaning of what the word credit means: sound foundations for critical trust and faith—economic, physical and spiritual, individual and social, based on a study of health and not largely of pathology and bankruptcy, a study of life and its dynamics and not only of a few islands and patches; a study also of the adult so that he may prove a fit helper to the too young and to the too old and to the too sick; a mental hygiene more broadly conceived than by those who want to limit their concern to infantile sexuality.

There still is too much seeking of help by the back door; too much flocking to those who promise what people like to have promised; too much hiding of one's unfamiliarity by claims that psychiatry is not mature enough and that it is not scientific unless it limits itself to the concepts and methods that the traditional sciences use.

There is good news at the opening of this second quarter century. For the first time in the history of the mental-hygiene movement, a sum of \$6,000 has been allotted to a study of what actually constitutes the load of responsibility of mental-hygiene work in a community of 60,000, the Health District of the School of Hygiene of The Johns Hopkins University.

The work for child guidance is already under unusually good coördination through The National Committee for Mental Hygiene under Dr. George Stevenson.

We already have support for the study and promotion of methods of training physicians to be psychiatrically intelligent, and for giving special orientation and opportunities for training to those who are to be licensed as specialists. The success of all this, to be sure, will depend on whether there are enough centers serving, not only as broadcasting stations, but as developers, systematizers, and demonstrators of practice in what modern man actually needs and wants. How many centers of work are there in this country that

come up to the standards of those familiar with the needs and the possibilities? We do not expect to start with completeness and perfection; but those who use the alibi of depression are not honest and square, and certainly not wise, if they take it out on education and on productive work with obviously problematic human beings who, neglected, might be the undoing of much sound philosophy and conduct of life.

Fortunately it is not merely or largely money that is called for. What is needed is the collaboration of many agencies already in existence to-day, recognition of work now being done that is worth coördination, and support for its immediate value.

Last week millions declared themselves for the New Deal in our public life. Let us help by making it through and through also a humanly fair deal, one that will give heed to the human factors in individual and social life, more and more intelligible to the rank and file as an illuminating national and human philosophy and practice. We must be grateful to the blind who have tried to lead the blind, but also more and more convinced that the best light will come from life actually lived, and from cultivating centers where mental hygiene will grow and explain itself by its work among the human objects of mental hygiene, who are necessarily at the same time the subjects, the participants, the workers, and the collaborators.

My tribute goes to the active spirits of the mental-health movement; my special tribute to Mr. Beers and to the leaders and workers of the National Committee, and my tribute also to the intelligent enthusiasm of the whole-souled, truly live and active representatives of human nature gathered here in honor of a great movement.

# THE CHALLENGE OF CHILDHOOD \*

## THE CHALLENGE

IRA S. WILE, M.D.

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MAN allegedly has been on the earth for 500,000 years. Mental hygiene is celebrating its twenty-fifth anniversary. Man's concern with his universe has been more profound than his interest in his own personal adaptations to it.

Maturity represents the goal of human development through heredity and environment, with physical growth and mental expansion. An inquiry into the causes of adult inadequacy or maladjustment involves a study of childhood. As Dr. William A. White has put it, "Childhood is the golden age for mental hygiene."

All human behavior is symptomatic. Its meaning may not always be clear, but it is at least a dynamic expression of the reaction of the living to life. Certain phenomena of human behavior are symptomatic of personal maladaptation, and these present the challenge of childhood to the psychiatrist and the educator, who, together, symbolize the search for the science and art of rational, stable living.

School systems theoretically deal with children as a whole, despite the fact that, practically, their main concern is with intellectual development. One should not say that the educator is concerned merely with the development of intellectual processes while the psychiatrist is concerned with emotional development. Both educator and psychiatrist are interested in the development of normal individuals, in the prevention of such strains and stresses as might cause deviation from normality. Both are involved in the reconstruction of those who already find themselves maladapted to social pressures. Both have responsibilities in solving

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the problems of mental defectives, epileptics, neurotics, and psychotics, as well as the difficulties of those who fall into delinquency and criminality. Both are concerned primarily with prevention and secondarily with cure. Both must recognize and serve the totality of the individual.

As a point of departure, I wish to present some significant statistical data which constitute a challenge and demand an answer, even though the answer may not be available at the present moment.

In their studies of male and female delinquents, Glueck and Glueck found that 42.6 per cent of the male delinquents had not gone beyond the fifth grade and only 4.4 per cent of them had attended a high school. Of the females, 35.8 per cent had not passed beyond the fifth grade, and only 8.2 had attended a high school. Forty and seven-tenths per cent had attended school regularly; 60.5 per cent had been rated as poor students; 78.9 per cent had been retarded two or more years below the grades normal for their ages.

The figures for school retardation are startling. In Boston in 1927, 37.8 per cent of the boys were reported retarded; in New York in 1932, 29 per cent of the children were reported retarded; in Chicago, the Children's Bureau, studying the Boys' Court, found that 58.6 per cent of the fourteen-to-fifteen-year-olds committed in 1923 were retarded two or more years; the New York Crime Commission has shown ample relationship between truancy and criminal behaviors.

These items challenge the educator. Laying aside for the moment all question of the mental hygiene of the teacher, the mental hygiene of methodology, the mental hygiene of the curriculum, I ask: What is the mental hygiene involved in the maladjustment of these retardates? What is the relation of retardation to the inability to learn, to truancy, to unfavorable attitudes toward society, to the development of unstable personality types, to profound maladjustment in later life, to dysgenic attitudes toward the self, the family, and society? What does society intend to do about the present fact of devastating retardation?

Childhood asks the educator what is being done to provide training for teachers in a reasonable understanding of

the meaning of mental hygiene, the nature of personality make-up, and the factors that enter into the stability of the nervous and mental system. What courses in mental hygiene or child psychology in terms of family living, as offered in training schools, serve as a background for actual teaching? To what degree are teachers given an opportunity to understand their own mental difficulties? What experience do they have in the advantages of educational guidance, educational clinics, child-guidance clinics, or other instrumentalities for guiding and directing the young? How long are teachers to be dominated by concepts of mass instruction rather than of individual development? How long are they to be engrossed with ideals of static order and silence, with the emphasis upon conformity in learning methods and content rather than upon the importance of personal growth and adaptation, the meaning of life and preparation for living it? To what extent is the concept of education in its literal meaning elaborated in terms of physical and mental health, with growth through experience in the pursuit of social adaptability? To what extent are teachers selected, directed, and eliminated in harmony with this challenge of childhood?

Childhood has a right to ask: Are educators more concerned with subject matter than with children? Is the mere transmission of facts and processes and ideals more significant than personal growth and preparation for life? Is the curriculum based upon a philosophy of children's interests and needs? Is there as much mental-hygiene content in reading, writing, and arithmetic as there is in the more releasing subject matter of physical training, art, and music, and other subjects too frequently termed "minor" or the "frills of education"? Do the emphases upon passing and failing, promotion and demotion, in non-selective scholastic competition, take cognizance of their effects upon the attitudes and personality growth of children?

While advanced educators recognize and stress the theory of individual differences, to what extent is there a general effort to transmute it into practical human values through school organization that promotes self-motivation, self-direction, and self-control? Schools do not appear to be

fully conscious of the life values in the emotional influences caught up in public education. As a matter of fact, do our schools of to-day generally accept the responsibility for the total well-being of the whole child as the highest aim of education, except in the printed course of study?

Are schoolmasters teaching subjects or children? What is the meaning and effect of retardation, demotion, forced promotion, rigid disciplines, truancy, unnecessary home work, over-directed drills, inadequate grading? What part do texts, tests, and teachers play in the psychic maladjustments of students? In setting up health, character, leadership, or preparation for life as goals of education, what recognition is given to the fact that the schools constitute the foremost social institution, with the exception of the family, that provides prolonged systematic supervision of the complete development of the young?

If delinquency and disciplinary maladjustments during the elementary school years are followed during the secondary and collegiate school period by an increasing number of emotional maladjustments, has the educator any responsibility? If so, how is he to meet it? Must he not begin during the elementary-school age? I ask, therefore, to what extent is education safeguarding the transition of children from home to school? Is there full appreciation of the altered personal relations, the newly demanded habits, the necessary adjustments in terms of independence and dependence, power, dominance, self-assertion, and submission? To what extent are schools evaluating the kindergarten and the first grade as more vital than the graduating class in facilitating the adjustment of children to life? Would not more stress upon the minor subjects of the curriculum provide for better emotional adaptation in the earlier grades than rigidity and emphasis upon formal material?

Appreciating that two-thirds of the children in our schools present definite physical handicaps and that medical inspection and physical training are of vital concern, to what extent do our schools conceive these physical disabilities to possess definite relationships to mental inadequacies and emotional dissatisfactions? The myopic, the hard of hearing, the victims of speech difficulties have more numerous

problems of mental hygiene than the children actually mentally defective. They must meet life as persons and not as deficient. To what extent are the various special classes meeting the needs of their personality values beyond supplying the usual curricular material with a modified methodology? What is the educator doing for the dull normal, whose plight perhaps, from the standpoint of maladaptation, is far more significant than that of the superior group in schools. Special slow-moving classes, the Dalton plan, individual progress in learning, adaptation of subject matter, revision of specialized and understanding teachers constitute the very foundation of mental hygiene in childhood. But to what extent are educators considering the problems of the neurotic, the psychopathic, the incipient psychotics, and the 750,000 children in our school systems ordinarily termed problem children? How is the educator viewing discipline—as a means of securing submission to authority and formalistic training, or as a method of dealing with personal social conflicts, expressed in terms of excitability, restlessness, tantrums, shyness, envy, surliness, pugnacity, and the like? What are educators generally doing for those actual and potential failures who suffer from emotional instability, that tremendous group of children in our schools, inferior in capacity, in effort, failing in achievement, resentful, hopeless, maladjusted, depressed, or agitated by their lot? How widely are special schools, adjustment classes, remedial teaching, individual guidance employed to safeguard against failure, disappointment, and even psychic deterioration and disintegration? Failures in education, vocation, social growth, and personal relationships must be attacked, and in no place does this become more essential than in the educational system.

I have stressed the term educator and at times perhaps euphemistically, but the psychiatrist is equally involved throughout the entire elementary-school system. There is a very notable increase of the need of psychiatric oversight during the period of adolescence and secondary-school education. The prevention of problematic disintegrations during maturity, however, demands attention during the elementary period. More than 50 per cent of the inmates

of our hospitals for mental diseases were subjected to gradual pressures and progressive frustrations under emotional stress, culminating in their mental diseases, whose symptoms had already begun to make their appearance during adolescence or earlier. Think of that large group, numbering at least a million, in our schools of to-day who, later in their lives, will be isolated from the world in mental hospitals unless psychiatric guidance and care can safeguard their mental health. Already many of them are manifesting symptoms of excessive shyness, timidity, exclusiveness, and solitariness. Already many are forsaking the world of reality to live in a dangerous world of phantasy, or are making responses to obsessive or directive, compulsive thinking, or are unhappily floundering between restlessness, excitement, exaltation and misery, subduedness, uncommunicativeness, and depression. Such symptomatic distresses often manifested during the strains of secondary schools burst forth more frequently among college students who enter upon college life with their problems unanswered, their conflicts unsolved, penalized by their own emotional immaturity and a striking incapacity for meeting the demands of collegiate adjustment. What are the colleges and high schools doing about all this? How far are they meeting on a preventive and corrective basis the threatening emotional situations of the unhappy neurotics, the eccentrics, and the potentially psychotic students who are flocking without preparation into our fields of higher education?

Just as one group of the under-educated in our population apparently offers a special challenge in the realm of delinquency to the educator, another group presents its challenge in the field of actual mental difficulty, primarily to the psychiatrist. In 1932 there were 631 hospitals for nervous and mental diseases in the United States, containing 427,343 beds, a number equal to the total beds available for the victims of all other diseases. In 1928 one person out of every 325 in our country was a patient in such a hospital, and it has been calculated that one out of every twenty-two persons in our population is likely to become a patient in some mental hospital at some time during the lifetime of a generation. This is a challenge to the psychiatrist; this



is a challenge to the educator. Where are all these potential patients? What is being done to them? What is being done for them?

Among delinquents we find personal education below the average. Among psychoneurotics and psychotics unfortunately we more frequently find education beyond the average. According to the New York State report on first admissions to its mental hospitals for 1931, 6.7 per cent were illiterate, 13.7 per cent had attended high school, 3.5 per cent had some college education. It is noteworthy that the manic-depressive and the dementia-praecox groups included a far greater proportion of individuals with the higher educational attainments. Higher education takes a toll that merits inquiry. The examination of the draft army of the last war indicated that 25 per cent of the native-born white males had achieved the eighth grade in school; 4.5 per cent had entered college, and 1.25 per cent were college graduates. If one considers the native whites born of foreign parents, one finds that only 50 per cent had completed the fifth grade. Only 25 per cent of the Negroes of the North had finished the eighth grade, while only 7 per cent of the Negroes of the South had finished that grade. What do these figures mean? They are an indictment of our educational program. They reveal that there is a terrific maladjustment in the educational system which calls for the attention of the educator and the psychiatrist in the interest of promoting educational progress and the mental health of a growing generation.

The problem of elimination from schools is by no means the concern of educators alone. According to the figures of our army, of 100 white recruits who might enter schools, only 45 would enter the eighth grade and 21 the high school; nine would graduate from high school; five would enter college; and only one would graduate. On the basis of this theoretic common experience, there is a sharp contrast between the figures that I have presented on the educational inadequacies of those who enter careers of delinquency and those on the educational advancement of persons apparently most subject to psychoses. Between these two groups there is another all too large group struggling valiantly to preserve their moral and ethical stability and to maintain lives

of personal social equilibrium. Many of them are victims of disappointment and unhappiness, caught up in personal disabilities, miserable with neurotic disorders, and ineffective in their daily life. They are calling for professional aid to teach them how to attain a more hygienic adaptation, that they may continue to work, play, love, and worship, reconciled by a rational philosophy, supported by the convictions of their personal principles, and fortified by a more confident belief in their own human values.

What is the psychiatrist doing? Is he developing increasing insight into the relationship between sane and sound living during the years of childhood and the potentials of fulfillment in maturity? Does he seek for the man in the child? How expansive is his program for preventive work? Is he hastening the education of psychiatrists, pediatricians, and general practitioners in and out of our medical colleges concerning the psychiatric and psychological approaches to the problems of human personality? Is he demanding and promoting the development of prophylactic clinics, habit clinics for the pre-school child, child-guidance clinics for children manifesting disorders of conduct and personality, clinics for adolescents struggling to adapt their emergent maturing urges to the dynamics of a restraining world? To what extent is he insisting upon a more intelligent appreciation of the social meaning and personal hazards of intellectual deviations and emotional instabilities? Is he building up adequate data concerning the relation of personality organization to social adjustment? To what degree has the psychiatrist reached into the problems of delinquency, of juvenile courts, of reform schools, of maladjustments in industry, of educational and vocational guidance? His greatest sphere of activity is no longer in the psychopathic hospitals, in institutions for mental defectives and epileptics, or even in clinics for ambulatory psychotics. He must function as a mental-hygienist in the realm of prevention and his rôle must be that of a leader.

Rarely is insanity a sudden event. Mental diseases evolve for the most part from beginnings during childhood and youth. There are numerous morbid manifestations which foreshadow mental deterioration and psychic invalidity. The

status of inheritance as a cause of mental derangement is by no means what it was. Family stock may play its part, but family practices and patterns are more effective in shaping character and personality. There is an increasing appreciation of the threat of dysgenic environmental influences upon the molding of personality. Educators and psychiatrists must coöperate in combating the native and acquired dangers that threaten the mind of man, while they foster the welfare of the child.

Twenty-five years have passed since Clifford Beers, out of his own psychic chaos, created a new world of human thought and action. Having begun with the urge to reform the hospital treatment of the mentally ill, The National Committee for Mental Hygiene soon arrived at a point where it saw the greater significance of preventing mental disease. We are now looking forward to a future in which we shall think, not in terms of the mind that found itself, but in terms of the mind that is never lost—of a mind that has the freedom, activity, and resilience of childhood, combined with the understanding and adaptability of rational maturity.

Childhood, therefore, issues this challenge to the world; long-suffering in the field of personality disorders must no longer be. Childhood must be freed from all that would tend to destroy it, injure it, and rob it of its fruitions in maturity. Childhood challenges the world which it cannot control, asking educators and psychiatrists: What are you thinking in the field of mental hygiene? What do you purpose doing that a growing generation may attain maturity, physically sound, intellectually active, emotionally balanced, socially competent, and above all functioning in terms of social usefulness, with personal efficiency, with social adequacy, with personal happiness?

## THE EDUCATOR'S RESPONSE

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SCHOOLS that accept the challenge of childhood try to answer it in two ways: first, by satisfying the child's normal needs and desires; second, by untangling the snarls of conflicting desires and repressed needs. Too often the term mental hygiene is restricted to the second of these, to a diluted psychotherapy. Properly it belongs even more to the first—the constructive provision for a child's wholesome living.

Every child needs a sense of security—self-confidence and confidence in the affection and approbation of others. He needs outlets for his energies, an opportunity to respond, in his own characteristic way, to the multitude of stimuli impinging on his neural organism. And he needs to participate in the actions, thoughts, and feelings of a social group. These needs can be largely met by schools willing to reorganize themselves for the purpose, and are being met to an increasing extent in a number of progressive schools to-day. I shall draw my illustrations from the schools I know best—the public schools of Winnetka—but without in the least implying that similar things are not being done, and in some cases perhaps better done, in other progressive schools.

The child's sense of security is helped by making the schoolroom and the whole school atmosphere childlike, homey, beautiful. The old type of schoolroom, with formal rows of rigid desks, with hard, uncurtained windows, and walls bare except maybe for a political map and gloomy prints of Washington, Lincoln, or the Colosseum of Rome, was effective in putting the child in his place, in repressing spontaneous outbreaks which might disturb the ticking of the clock. But to-day we are moving toward pleasant rooms, informal, comfortable, made cheery by color and by growing things. In our oldest school in Winnetka, for example, the parent-teacher association and the school board, coöperating, recently achieved a transformation. A P.T.A. benefit raised

money (depression to the contrary notwithstanding) for soft-colored curtains. Emergency relief workers furnished labor; the school board, paint. All the rooms were redecorated in different colors, harmonizing with the curtains. Desks—they're the movable kind, of course—were painted to go with the rest of the colors. Plant baskets and stands were installed and stocked. The teachers themselves began planning their school clothes to fit into the color scheme of their rooms. From being the least attractive school in Winnetka, this one became the most attractive—although the others, too, have hominess and beauty. And these qualities in a school, I maintain, are part of mental hygiene—a help in the development of secure and wholesome children.

The physical features, however, would be of little value if the room atmosphere created by the teacher were not directed toward the same end. Children must feel friendliness and interest on the teacher's part. The old taskmaster type of teacher still exists in many places, alas, but is gradually being replaced by the guide, counselor, and friend.

Not long ago we made a two-year study of the characteristics of teachers who were most successful in achieving our educational ideals, in contrast with those who, though presumably well trained and carefully selected, were unsuccessful. The result showed that among the most determinative of the differences between the two types of teacher were emotional balance; power to encourage, stimulate, and inspire children's interest; forcefulness; ability to control children without repression or domination; ability to control children without emotion and sentimentality.

But even a teacher with these qualities, teaching in an attractive classroom, will fail to give children a sense of security if she tries to make them learn things for which they are mentally not yet ready. This is one of the cardinal sins of the schools of yesterday—and to-day. People have talked of adapting schools to individual differences for at least two decades, and various feeble gestures have been made toward this adaptation. Ability grouping is such a gesture; so are so-called "differentiated curricula." But even where these gestures are made, actual practice makes



shockingly little provision for the great range of differences in ability known to exist among children.

Recent studies have shown that there is a stage of mental growth when a child can learn, readily and with retention, a given topic or process. To make him attempt to learn it before he has reached that stage is to doom him to failure—to a sense of the futility of effort, and consequently to a feeling of insecurity and inferiority. More work needs to be done in finding out just what stage of growth is needed for each school topic, and how to determine for each child when that stage is reached. But already we have enough knowledge to enable us to avoid, in most cases, giving a child an assignment in reading, arithmetic, formal language, or spelling, before he is psychologically sufficiently mature for that particular assignment.

In Winnetka we have a chart—called a goal card—which summarizes the general course of study by grades, but with the units of work arranged according to the approximate mental age a child must have reached if he is to make a successful attack on the unit. Each teacher has, for every child, a graph sheet from which she can read his mental age at any time. Every six weeks, using this graph and her knowledge of the child, the teacher marks on the child's goal card the amount of work he as an individual is expected to accomplish during the ensuing six weeks. In so far as our knowledge and skill enable us to do so, therefore, we give each child work that he can attack with confidence. The result should be, and I believe usually is, increased security.

Such individual assignments minimize rivalries and failures. The child's report card is a simple statement as to whether or not his progress is satisfactory in terms of his own assignment. A slow child has exactly as good a chance of being marked satisfactory as has a bright one. Unfair competition, dooming some children to a sense of insecurity and futility, is eliminated.

The second main type of need in a normal child is an outlet for his energies. The term "self-expression" has been over-used, but I know of no good substitute for it. Progressive schools have been primarily distinguished by the degree to which they have provided avenues for the child's own

characteristic expression, in writing, in the graphic arts, in handicrafts, and in drama.

Hughes Mearns has given pen and tongue to the idea of getting creative written expression from children. All teachers in progressive schools will, I think, agree with Mearns's aims and find real help from his methods. Some, less publicly articulate than Mearns, are doing equally fine work. But many a teacher strives in vain. We haven't yet learned how to train the teacher who hasn't a natural knack to stimulate children to a high degree of artistic achievement. But any teacher can at least encourage originality and freedom of expression.

The same is true of art. A Cizek may get extraordinary results from his children, but the less gifted teacher can at least get spontaneity. Certain techniques, like the use of large sheets of paper and calcimine paint, or the "finger painting" recently introduced from Rome, tend to free the child to express what is in him more than did the careful drawing and water colors common to the older schools.

Pottery, art metal, the various handicrafts, and shop work are all definite parts of the modern school, and all invite the child to express himself through his hands. The creative musical-instrument-making of Satis Coleman in New York, of David Dushkin in Winnetka, and of several others working along similar lines, serves a similar purpose, particularly for the child to whom music makes an appeal.

Puppets and creative dramatics—where children write their own plays, act them (or have their homemade puppets do so), plan costumes, scenery, lighting—these stimulate self-expression and give it a scope probably greater than any one other school activity.

Self-expression, however, need not be confined to creative activities. The following-out of special interests is likewise of value in developing wholesome childhood. In our own schools we have electives (we call them common-interest groups) in all grades above the primary. For an hour once or twice a week, the school is partly regrouped, not by grades, but by interests, the child leaving his grade room and going to the room in which the others who have an interest in

common with his are gathered. The children themselves have suggested the types of group they would like—a nature group, a photography group, a cooking group, a science group; radio, shop, music, airplanes—the number of interests seems unlimited. And in the junior and senior high school, of course, the range of electives and amount of time available for them is still greater.

Scarcely to be separated from the self-expressive activities of various kinds are the socialized—and socializing—activities. The child needs participation in the work and aspirations of a group, and he needs to realize that he is an integral part of a group.

Organized playground work, under a supervisor who knows how to use it for this purpose, contributes greatly to a child's socialization. Student government—or, better, responsible citizenship in the school—is of high value. Student government obviously should never be of the sitting-in-judgment, inflicting-of-penalties sort, although I have seen that in otherwise fine and progressive schools. But student committees in charge of school stores, library, care of plants, care of toilet rooms, making assembly programs—and so on through the whole range of school activities—can learn to think and work together for the common good.

Student councils and classroom discussions of moot questions—either in regard to the immediate affairs of the school, or to larger affairs outside—are strong socializing influences. For example, our children recently had a very heated discussion on whether to raffle off some rabbits owned by a school “live-stock corporation” which was losing money; and another discussion on whether or not Hallowe’en pranks were taboo—if so, what kinds. From such discussion of local and child-centered problems often comes discussion of public affairs in the outside world. The raffle question led to the whole problem of gambling and laws prohibiting this and other supposedly harmful practices; that on Hallowe’en pranks, to the matter of being law-abiding and having respect for property. But the larger questions are also taken up quite directly throughout the courses in social science and current events. The socialization of the

child must integrate him with a much larger group than that of his schoolmates.

Group enterprises or projects are used by most progressive schools to help give children social experience. The making over of a classroom into an Egyptian temple, the building of an acropolis, the issuing of a school newspaper—the number of possibilities is legion—all such things bring children together in social groups with a common purpose, and with the necessity of modifying their individual ideas to fit in with those of their fellows—a matter quite as important as individualistic self-expression.

And because both the self-expressive activities and the socialized activities are happy, childlike experiences, they also add to the child's sense of security. In so far as schools achieve security, self-expression, and social living for children, they are going a long way toward answering the challenge of childhood.

Yet there is the other aspect of mental hygiene—the therapeutic side. Despite every effort on the part of the schools to meet the child's needs, we have maladjusted children. They may come from maladjusted homes, or the school may, in spite of its efforts, have failed to give them what they need, or there may be difficulties inherent in their physical or neural constitutions. Anyway, all schools, no matter how progressive, have problem children, and must, if they are to accept the challenge of childhood, set up the means for helping them become adjusted.

The means set up in Winnetka is the Department of Educational Counsel. This department has had a long, slow growth from a seed which gave little promise of what was to develop from it.

That seed was the so-called "special room" which existed in Winnetka sixteen years ago, as it existed in many another school system. It was a small class of subnormal youngsters with a few delinquents thrown in for good measure. The teacher was chosen for her ability to maintain strict discipline, to have patience, and to give special individual help to each child in his academic work, with some handicrafts on the side. When this teacher left, we replaced her with a social worker—not a trained psychiatric social worker, but

a woman with good common sense and a real interest in children's welfare. I suppose that was when the seed began to sprout.

Within a year this social worker, Mrs. Brenton by name, came to me and said: "I don't think this room is a good idea. Children not in it call it the 'nut room.' Those who ask to come into it do so in the spirit in which a man enters a petition in bankruptcy—they know no other way out. But the room separates them from their fellows and stigmatizes them. I suggest that you let these children go into classrooms with children of their own age, and let me take them out by appointment, in small groups at a time, for special help on their academic work and for handicrafts. Let me advise with their teachers as to modifications in their courses of study."

It was easier to do this in Winnetka than it would have been in a school system which had strict class instruction. Our academic work was already well on the way toward individualization when Mrs. Brenton made her proposal. It was not at all difficult to let a child sit in a so-called fifth-grade room and do individualized third-grade arithmetic. We soon found that Mrs. Brenton was able to give help and supervision to three times as many children as she had had in the special room. And teachers began to ask her help with behavior problems, as well as with subnormals.

Mrs. Brenton's successor was one of our own teachers who had shown a singular ability to understand problem children and to help the subnormal ones. She, however, urged that we get some one professionally trained for the job; so when she moved on to a principalship in one of our elementary schools, we secured our first psychologist, trained in remedial teaching, and to some extent in child guidance, although not primarily from the psychiatric standpoint. Bronxville took her and we replaced her with our first trained psychiatric social worker—Frances Dummer, known to a number of you. Then things began to happen fast. In two years' time Miss Dummer had stimulated the thinking of all members of the faculty along the lines of mental hygiene. She had organized classes for teachers and for



parents, and she had centered the work more on behavior problems and less on problems of subnormal mentality.

At this same time we secured the coöperation of Mrs. Rose H. Alschuler in the establishment of a nursery school in the Winnetka public-school system. The emphasis in the nursery school was also on mental hygiene and there was a natural rapprochement between Mrs. Alschuler and Miss Dummer. Mrs. Alschuler built us a nursery school the next year and added on to it a suite of offices for what was about to become the Department of Educational Counsel.

Then we approached the Rosenwald Fund, the Institute for Juvenile Research in Chicago, and two local pediatricians, to see if we couldn't start a real child-guidance clinic in the Winnetka schools. We got a grant from the Rosenwald Fund, payable \$5,000 the first year, \$4,000 the next, and so on down to nothing. The Institute for Juvenile Research agreed to lend us a psychiatrist and a psychologist one or two days a week. The local pediatricians—Dr. C. A. Aldrich and Dr. George Munns—volunteered their services. We added two more psychiatric social workers—we call them educational counselors—and a full-time secretary, and the Department of Educational Counsel was established.

Two or three years later, as the Rosenwald money dwindled and as we felt the need for more work with parents and wanted a full-time psychologist of our own instead of a part-time one from the Institute, we got a small two-year grant from the Wieboldt Foundation, contingent on our raising an equal sum locally. The depression was beginning, but we managed to raise the local subscriptions and the department reached its maximum personnel—four educational counselors, a full-time psychologist, a full-time secretary, a psychiatrist from the Institute for Juvenile Research two days a week, and the help as needed of two pediatricians—all this for a school system of four schools and a total of less than 1,800 children.

Things hummed. Every teacher in the Winnetka school system was given training in mental hygiene; there were classes for parents of children at various age levels, and for parents who wanted help on their own personal problems; the accumulated cases of maladjustment were referred to the

department, studied, and helped. As far as I know, no public-school system has ever had the amount of intensive mental hygiene and psychiatric help that was given in the Winnetka Schools in 1929, '30, and '31.

But the depression grew worse; Cook County taxes were in a hopeless muddle; both the Rosenwald Fund grant and the Wieboldt Fund grant ran out and could not be renewed; it was impossible to get subscriptions. It was a period of severe retrenchment in all schools. Tax-payers were clamoring to have expenses reduced in proportion to the reduction in their salaries and incomes. Winnetka, like every other place, had to reef its sails.

The sails were reefed, but not taken down, and we continued to go forward. We reduced our number of educational counselors to two; but we kept our psychologist and the department secretary; the Institute, also pinched, cut our psychiatrist to one day a week; the pediatricians stuck to their post.

This reduced, but effective, department weathered the storm of 1933, when a political tempest threatened the entire Winnetka school system. The school board, which had looked a bit askance at the department when it was first organized, did not once suggest, even under the fire of sharp demands for retrenchment, that the department be abandoned. And the embattled critics of the schools attacked almost everything except the mental-hygiene work as such. Had their other attacks been successful, instead of being overwhelmingly repulsed as they were, the Department of Educational Counsel would necessarily have gone down in the crash. But it is significant that even the critics realized that mental hygiene in the schools was too highly valued to be vulnerable.

Last winter the next real change in the Department of Educational Counsel got under way. The counselors, meeting with the psychiatrist and the superintendent of schools, said: "Is there anything wrong with our work? Aren't we getting our ideas across to the teachers? Do they realize that we have specialized training to offer them? It seems to us that they are more and more handling their own cases and that they are not using us as much as they might. Far

fewer cases have been referred to the department during the last year or two than in the past." The psychiatrist (Dr. Temple Burling) added: "Those whom the teachers refer to the department are the very sick children, the ones who need psychotherapy rather than mental hygiene. The ordinary problems the teachers themselves know how to handle as well as any of us. They have been working with this department for six years, they have had courses in mental hygiene, and they know what to do in most cases of maladjustment."

That was an extremely significant meeting. The Department of Educational Counsel, as originally organized, had worked itself out of a job!

The fact that the two counselors were offered positions at considerably higher salaries in other localities made a reorganization possible without harm to those who had labored so effectively. If the children now being referred to the Department of Educational Counsel were "very sick children" in need of psychotherapy, then psychotherapy was the thing for us to provide. For this we could not count on a psychiatrist one day a week with a change of personnel about once a year. We needed some one on the job all the time. So we pooled the salaries of the two educational counselors. We got secretarial help for the four principals, so that they would have more time to help with case studies of the children in their own buildings, and we employed Dr. Burling full time as our psychiatrist.

The Department of Educational Counsel as now set up consists of the psychiatrist, the psychologist (William Voas), and a secretary, all on full time, and, giving part of their time, the four principals, the superintendent of schools, and the pediatricians.

The functions of the department are fourfold: work with the children, work with the teacher, work with the parents, and work with the school administration.

The work with the children is of two types—advisory service and full case studies. The psychiatrist is in each school building a large part of one day every week. He goes into the classrooms, watches the children at work, talks informally with the teacher and with parents, and keeps in

close touch with exactly what is going on. The teachers, therefore, freely consult him for advice on children not requiring full case study, and the principals discuss the problems that have been referred to them.

Full case study is very much the same in the Winnetka department as it is in any other child-guidance clinic. A family history is obtained by the principal or the teacher or the psychiatrist himself. The faculty members in Winnetka are in very close contact with parents and the formal call by a social worker is replaced by many informal conferences. There is a physical examination by the pediatrician; there are psychological examinations as to intelligence and special disabilities and aptitudes by the psychologist; and there are the psychiatric interviews by the psychiatrist. Staff meetings are attended by the teacher and principal concerned, the psychologist, psychiatrist, pediatricians, and superintendent of schools. The case is thoroughly discussed from all angles, and a plan of action worked out. At subsequent staff conferences reports are made as to progress or lack of progress.

The department's work with teachers consists of three types of activity. There are regular classes in mental hygiene for teachers. These include summer classes for prospective Winnetka teachers and for others who come to the Winnetka Summer School for training. They include, too, classes for the students in the Graduate Teachers College of Winnetka, a small, year-round professional training school for persons likely to be outstandingly fine teachers, and a source from which the Winnetka Public Schools tend to draw new faculty members. And they include seminars for teachers in service. All these are conducted by Dr. Burling at the present time.

Second, there is the indirect training of a teacher, when the psychiatrist is helping her in the adjustment of one of her children. Both when the psychiatrist is advising the teacher informally and when the teacher is sitting in a staff conference for a full case study, the teacher is being intensively trained.

And third, the psychiatrist helps the teachers with their own personal problems. This is perhaps the most impor-

tant value in the reorganization of the department. When the psychiatrist was with us only one day a week and the counselors had to do most of the work, psychotherapy for our teachers was almost an impossibility. Now it is the most natural thing in the world—and a matter of great consequence. For a teacher cannot use sound mental hygiene with her children if she herself is in serious need of adjustment.

The work with parents is similar to that with teachers. There are occasional classes for parents; there are conferences with parents in connection with their own children—conferences which inevitably result in instructing them in the principles of mental hygiene; and within reasonable limits there is psychotherapy for the parent of a child whose behavior problem results from the parent's need of such treatment.

Finally, the department works with the superintendent of schools, the principals, and the supervisors in establishing school policies. To the department come those cases in which the school has failed to make satisfactory adjustment. How far is that failure due to inadequacy on the part of the school system itself? How far can maladjustments be prevented or mitigated by changes in school procedures? In answering such questions, the Department of Educational Counsel is of continuous value to the school organization as a whole. And in answering such questions, it is fulfilling not only the remedial function of mental hygiene, but the constructive function, with which the first part of this address dealt.

To answer the challenge of childhood, the school must fulfill both functions. It must provide for the diagnosis and treatment of children whose lives are not satisfying to themselves and their fellows; and it must attempt to orient its whole organization toward the fulfilling of every child's need for security, for self-expression, and for social living.



## THE PSYCHIATRIST'S RESPONSE

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**B**EFORE the challenge of the child, the psychiatrist, in company with all other adults, stands somewhat abashed. The naturalness of the bizarre, which is so typically a part of the child's mental processes, will perhaps forever mean that the adult stands by rather helplessly as the child lives his early years.

Moreover, there seems to us evidence on this, the twenty-fifth anniversary of a great movement, that the psychiatrist has not, so far, met the challenge of the child with any very telling accomplishment. Following the magnificent lead of Beers in the mental-hygiene movement and of Healy in clinic work, we have purposed a great deal. We have thought to unravel the relative simplicities of the child's mind and to show a blind and bigoted society that by this understanding the child's needs could be readily met. For all of this, frankly, there has so far been disappointing accomplishment. Here and there happiness has replaced sorrow, freedom has grown out of bondage, but these have been of those individual situations which probably the world has always known. There seems evidence that maladjustment and delinquency are as rampant as ever and that we have no certain technique for their prevention or control. No one can fail to tingle to the battle cry that we must understand the child—and to rally about this standard. That at least has been real progress—and perhaps for this quarter century we were but myopic to ask for more. Whether this be so or not, there is now the task before us of reëvaluating, of again assaying our position. An anniversary is a close, but if it is not also a commencement, then indeed the challenge of the child only mockingly reëchoes.

The answer of the psychiatrist must be the answer of a physician. There is for us no other solid basis of training, philosophy, and action. If fact and trend call us to wider

implications, we must extend our own sensitizations to other fields rather than attempt the point of view of other disciplines. I take it that being physicians means four things: (1) that we are intensely individualists, and that we think in terms of (2) diagnosis, (3) therapy, and (4) prevention. It is in the light of these that I propose to survey our present position and see, if possible, our next steps. A fifth consideration is a path of alluring invitation—that of research. No other path may wander so and lead to such inviting and futile unknowns. I take it that research belongs to all four of our main headings—that it but represents a way of looking at the material of life—and on this basis accept its implications as always present in the considerations of the other four main headings.

The growing importance of psychiatric theory and practice during this generation is a matter of no mere chance. For many centuries our cultural lineage had accepted the sanctity of the institutional structure within which it lived. The richness of one's life was measured by one's contribution to the solidity and preservation of these institutions. Beginning in the middle of the last century a change occurred. That which had been accepted was questioned—interestingly enough, not as to its value, but only as to its sanctity. It was not until early in our own generation that this grew to a questioning of value—not until then that people began to ask whether institutions did not bind and hamper rather than serve and enrich. From this query came chaos—and this grows to-day. In answer to the challenge of the child, it must be said that we are teaching him to question everything, to tear at every claim of salvation, coldly to assay every appeal for faith. To see this as a forward step means to see it as a period of uncertainty which precedes the building of new bases and goals.

That these are being built is beyond question. Wherever one turns, there appears the first groping toward the orientation of institutional structure and procedure to the needs of the personality. We have turned our faces from the curriculum-centered school to the child-centered school. We are asking less about what children can do for the family and more about what the family does to children. All

through the tumult and uncertainty of our present economic crisis is the insistent query of what our socio-economic structure is doing to people. It is not mere chance that in 1930 our leaders were asking what was happening to gold reserves, overproduction, etc., while in 1934 they query what is happening to people.

So we move toward an individual-centered world. Just as in the past each bit of life was oriented and measured by what it contributed to church, family, state, or profit, so now is the standard more and more the individual.

This placed a tremendous responsibility upon the psychiatrist. His was not the entire load, nor was he the initiator of this new question as to the meaning and goals of life. It yet remains that as an individualist—as a person trained above all else to think in terms of what the material and spiritual environment means to individuals—he must share largely in this new venture. Indeed if an individual-centered world is not to be one of a bundle broken into its many and ineffective strands, it will perhaps be due precisely to the work of the psychiatrist. His group has equipped itself perhaps better than any other to study what the stresses of life actually mean to people. Those breaking under the load of the demands of a relatively inflexible cultural pattern have come to his hands. There is a persistent statement that he sees and knows only abnormal situations. This is probably true, but it is also true that those who break under this strain are but the dramatizers of the problems that face all people. It is those who thus throw into strong relief the problems of every one of us to whom we must look for the solid data upon which an individual-centered culture will be built.

This is not to say that the psychiatrist is to become a sociologist—or perhaps even a reformer in a world that is rapidly changing. Because through a process of selection he is an intense individualist, because his training is that of the study of individuals in all that life's stresses have meant to them, because his practice little recks of anything other than that he adjust this individual to the conditions about him, the changing pattern will look to him for the answers

to the more sincere questions involved in this venture of an individual-centered culture.

Nor, on this twenty-fifth anniversary, do we have answers to these questions. Our individualism has been too parochial. What we have done we have done well, but we must match our stride to new demands. In an amazingly short time we have broken the wall between the act and the actor; the question on many lips is no longer, "What did he do?" but, "Why did he do it?" We have broken the wall between the physical and the mental; our greatest contribution to modern medicine is this picture of the total integrated personality which is both body and mind. We have broken the wall between the past and the present; the concept of the importance of the unconscious is no more than to say that the present can be understood only if the past is known. But the wall between the person and his environment still is a barrier to the psychiatrist, and he still fails to see that the knowing of the individual is the knowing of his family, his street, his neighborhood and nation as these are a directing, dynamic part of him. The changing world will look to us as individualists and must rest its feet on the solid steps we build, but we will play it false if we do not realize that the individual is as much the result of the currents, the drives, the tawdry niggardliness or glowing triumph of his environment as he is of his body hungers or the unsatisfied cravings of his own earlier life.

And we have another stake in an individual-centered culture. For a long time we have been diagnosticians—there has always been in our basic make-up this question of "why" a thing is so. Psychological determinism directs our every step—each act is the absolutely necessary sequent of all that went before, if that were but well enough understood.

Yet we are still woefully lacking in effective and realistic diagnosis. There have been many reasons for this failure. They list themselves something in this manner:

1. In diagnosis we have been entirely too much preoccupied with fads.
2. We have had thrust upon us overnight questions that have puzzled man for many centuries. Our answer has

been a number of brilliant, but somewhat unrealistic generalizations.

3. We have not at any point carefully set up and then tested a theory as to relationships. Our hodgepodge of hypotheses has been too much dependent upon the opportunistic needs of each local situation in which the psychiatrist worked. In other words, our primary interest has been in therapy and we have allowed our diagnosis to be merely the handmaiden to what seemed the therapeutic needs.

4. The bases upon which our diagnosis had to rest have been rapidly changing. What seemed certain in relationship to-day has shifted by to-morrow—nor are any of us at that level of basic needs and problems that we have yet escaped this transient character of all of that which we rely upon for diagnosis.

Nevertheless, in the face of these difficulties our steps toward more sure-footed diagnosis must be relentlessly pressed. I make free to indicate what now seem the most imminent ones:

1. We must plan better coördination. Each one working in answer to the local demands must be given autonomy of approach and method, but we must know more as to how to fit his bit of diagnostic knowledge into the total pattern. In other words, just to-day we are not in need of further studies and more knowledge so much as in need of knowing the relationships of the bits of knowledge we already have. A rather helpless world is deluged with pieces of mosaic which certainly have a pattern, could they but be sorted.

2. One suspects that, at least for the child, the sector dealing with the physical factors in maladjustment is woefully weak. Our honeyed words to the pediatrician have been much more that he see the importance of the functional aspects of adjustment than that he enrich our knowledge with sound information as to the importance of the physical factors.

3. We need to change our whole conception of the factors underlying mental health. Because so many of us began our training in the mental hospital and so thoroughly interested ourselves in the characteristics of mental disease, we have too much the tendency to think that mental health is



merely the absence of mental disease. Mental health is certainly more than freedom from insecurity or delusions. Our entire philosophy must turn more toward that which contributes to the individual's progress than toward that which holds him back.

4. Our plea for a wider diffusion of interests in causative relationships is in no sense to be taken as supporting to-day's comfortable, but futile eclecticism. The psychiatrist to-day shops about for a fitting bit of theoretic background for each particular job, much as the citizen makes his decision before a dazzling and tempting array of French pastry. This sort of thing has been hailed as a forward step—one ahead of the blind and unquestioning following of any one fad. This it may well be, but it means nothing of advance in the real problems of diagnosis. To the psychiatrist as a therapeutic agent goes the right to use whatever tool he needs. For the diagnostician this sort of shopping about is but an escape from the difficult task of really understanding the job that lies before him.

We also have new problems in therapy.

Over this last generation, we have had certain startling successes, but these are open to the suspicion, at least, that they have depended on the patient-physician relationship quite as much as upon the application of any specific technic. There is the further common-sense observation that communities or groups subjected now for some years to the ultra-violet rays of our technics have not exhibited any startling metamorphoses. In addition, a little statistical information has tended to show the same thing. What is one to say of this?

Of course the physician has never been more than a tyro at therapy. In all but the smallest fraction of his cases, he alters the conditions under which the patient lives rather than the difficulties themselves. The specific therapeutic agents for the amelioration of disease processes can be numbered on one's fingers. In view of this medical background it is no less than grotesque that the psychiatrist has thought that he could bring successful therapy through work chiefly with the maladjusted individual himself.

If, however, to alter the attitudes of the maladjusted indi-

vidual is to essay a task more difficult than that which any other medical group has attempted, it is worth the candle. For those who would go on confining their contact with the patient's environment to what the patient thinks it is and their alteration of that environment to an alteration of the patient's attitudes toward it, we have all admiration and the expectancy of light upon many important problems.

But we suspect that the answer lies elsewhere. We suspect that as we go on we will recognize much more the part which the distorting pressure of the environmental demands put upon the unfolding process of the personality. As we do so we will cease so much to blame this environment, cease so much to escape it through long hours in the comfortable security of the physician's office—and rather attempt some sort of coöperative enterprise with that environment in the rehabilitation of the patient. True, we may develop a few specific cures, but for the most part we suspect that we will do what every other physician does—assay, with all good care, the situation in hand and then more and more tend to alter the conditions under which the individual lives. Once more we say that this is not to make of us sociologists. It is to say that a biological science is essentially incomplete if it does not know how the environment affects the object of its study and what that object must have from its environment to satisfy its own development.

One further trend in therapy seems now to stretch before us. Up to the present we have bent our efforts toward the solution of problems. There seems now a tendency to look at the matter in another light. We are to be concerned not so much with the adjustment of problems as with the adjustment to problems. We are more ready to see for each person only changing constellations of problems—to recognize that there is no "right" way, but rather always the artist's task of balancing an ever-changing configuration of what seems for good and evil. The earlier propaganda that we had in our hands some golden road to a problemless world is disappearing. Life never ceases to be a struggle of compromise between the part-goodness of different solutions.

And we are interested in prevention—in the use of what we learn to the end that we are not forever simply gathering up the débris of life. Important as this is, we know little

of it. Theoretically, we can do much to prevent the more serious maladjustments—perhaps actually we do much—but the fact remains that there is no acceptable and unquestioned proof to-day that we have made any progress in a preventive program. There are reasons for this:

1. We need more knowledge. Until we know more of the source of difficulty, we are footless in attempting to control it.

2. Here, as before, is the possibility that life moves so rapidly and with such new complications that by the time we have real knowledge, it is beyond use.

3. Perhaps there can be no prevention. Perhaps there must always be many who cannot meet the rigors of life adjustment. Perhaps we are never to be more than spectators of the pageant of life—cheering or hissing as each passes in review, giving courage or censure. Nothing presses upon us so much as this need to meet these situations before they are filled with tragedy for society and the individual, yet nothing is so elusive, so taunting in its ability to escape our grasp.

Prevention, with us, up to the present time has been based upon concepts of time and degree of simplicity. On apparently very reasonable grounds, the theory was accepted that maladjustment begins with slight deviations from the normal, and that these deviations increase in size and severity with the passage of time. Thus there has been a merry chase to get at problems at their earliest beginnings—a chase that within two decades has led us to the adolescent, to the child, to the infant, and then to his parents, so that we are really back again where we started. However, it is increasingly apparent that problems are as complex at their apparent start as at any later date, though obviously they differ in the extent to which they exhibit themselves in overt social difficulties. The child is no simpler than the adult—nor is delinquency more simple than crime. The approach to the child is easier than to the adult, but his problems are no simpler. That is, our reorientation must certainly be toward recognizing a shift in the locus of the symptoms rather than in any conception of their increasing complexity as time goes on.

In other words, in prevention there is probably little to

choose as to the time of attack. Availability is of immense importance—and the all-or-none response of the child joins with the fact that all children are brought together in the school to indicate the years between six and sixteen as those where we may best concentrate our attack.

The growth of these first twenty-five years has been largely one of a changing point of view. The cold assay of our accomplishments does not pan much gold, but in these twenty-five years we have moved from the relative security of mental-hospital work into an effort at meeting the problems of people in the general social stream. That we accepted this challenge and that now we face it with even greater courage is a great advance. By our side goes Society, and it, too, has accepted a new challenge. But a generation ago it built its values on things. It measured people by their contribution to wealth. It was indeed a profit-centered culture, seeing everything in terms of its contribution to net proceeds. To-day this is changing. To-day unmistakably there is the tendency to think of profit, to think of every other institution, in terms of what it means to the individual. Society gropes its way just as we in these steps. Moreover, the child also faces a new world, a world of uncertainty; a world in which somehow he must learn to use the things that we have worshiped; a world that will be of people rather than of things; a world that will measure his success by what he makes of himself rather than by what he makes of goods or money.

For all of this new vista it would be childish to make plans this afternoon. We psychiatrists will have to feel our way, as Society is feeling its way, toward new conceptions, new ideals—and as the child, too, ventures something new. Beyond doubt we go to better things and better ways. We are here now at a milestone fired with the courage of these twenty-five years of the development and organization of the medical point of view in the field of human relations and on that basis ready to face the future. These have been years of an affirmation that we, too, will bend to these new tasks.

We must remain individualists because there alone we are on solid ground. But we must see that the individual

stretches just as truly out to the limits of all that is about him as he stretches to the limits of all his past.

Diagnosis will not mean getting information from parent, teacher, pastor, school, and neighborhood about the child, but rather knowing each of these because they *are* the child.

In therapy we perhaps must follow our own medical traditions in more and more realizing that the life of the individual is but the passing pageant which we are privileged to watch. Here therapy means what it means to-day to the internist—that we do not alter life so much as we have faith that life will live on in its own unity of purpose and content if we can but know the way to make this possible. This means a coöperative enterprise with every social institution and agency toward a cultural pattern that frees and enriches rather than distorts.

And what do we say of prevention? Not since the Renaissance has a generation been so much in question as to that for which it is preparing its children. We look out upon the next twenty-five years with no certainty of what in pattern and need it will mean for individuals. Prevention probably means that we prepare our children to meet change. Here is a new task in education. No longer can we safely prepare children for a certain type of pattern. We must give them fearless courage to try what is new; and we must equally give them faith in the old, so that they do not turn to new ways only because they are new. We must teach them more clearly the difference between what is life and what are merely the symbols of life. We must give them more of an integrated completeness and satisfaction in themselves, so that there is not the dependence upon material things which has been so much our curse.

The challenge of the child, so far as it demands our interest and endeavor, has been met in this first twenty-five years. We have mobilized our forces and have set up various administrative procedures for a real answer. The challenge of the child, so far as it asks the effective collection and use of data toward a world of less maladjustment and more happiness in life, frankly has not been met. It is well that with this spiritual background of the last generation we meet together to-day to consecrate ourselves to this new task.



## THE NEXT QUARTER CENTURY

CLARENCE M. HINCKS, M.D.

*General Director, The National Committee for Mental Hygiene*

WHEN The National Committee for Mental Hygiene came into being in 1909, the vision in the minds of its founders was the piteous procession of the "insane." They knew from report or professional experience what Clifford Beers's book, *A Mind That Found Itself*, had crystallized as concrete reality: the sufferings of tens of thousands of unhappy people behind bars, manacled, strait-jacketed, at best hidden away with little more than routine physical care, at worst in confinement rivaling a medieval dungeon. They saw, moreover, the oncoming hundreds of thousands who would meet a similar fate unless science and humanity intervened.

Protection of the insane and prevention of insanity were the watchwords of that Magna Charta of organized mental hygiene, the prospectus of the Connecticut Society, which was founded in 1908 as an experiment on a limited scale before the launching of the national movement: "for education always, for reform as long as radical changes are needed." In such an effort public understanding and sympathy were essential. As Dr. Adolf Meyer wrote in 1907 in an open letter to further Mr. Beers's proposals of national organization, here lay a work "which will be one of the greatest achievements of this country and of this century—less sensational than the breaking of chains, but more far-reaching and also more exacting in labor."

The men and women whose names were associated with the start of this movement stand witness to the caliber of the undertaking: William James, Adolf Meyer (who suggested the phrase "mental hygiene," with its constructive emphasis on health), Thomas R. Lounsbury, Stewart Paton, Julia Lathrop, Jane Addams, William L. Russell, W. H. P. Faunce, Livingston Farrand, William H. Welch, Henry Phipps, Cardinal Gibbons, Henry B. Favill (president of the Com-

mittee during its first years), Lewellys F. Barker, Charles W. Eliot, Mrs. William K. Vanderbilt, Elizabeth Milbank Anderson, and others equally well known, but too numerous to mention. Then as in its later years the Committee was fortunate in having on its control and advisory committees men of the highest scientific attainments, who refused sponsorship to brash and ill-advised projects in this rapidly developing field. It is significant, however, that from the beginning the Committee brought together in its membership, not only leaders in psychiatry, the discipline most directly concerned with its aims, but America's wisest in many great social fields—education, medicine, public health, psychology, philosophy, law, social work, philanthropy.

Behind the founding of the National Committee lay such a vision as had stirred Pinel more than a century before, when he struck the chains from miserable creatures in French madhouses; as had animated Dorothea Dix's extraordinary campaign for legislation and hospitalization and public sympathy with the insane in this country in the middle of the nineteenth century. In the Committee, however, the genius and single-minded devotion of a leader were reinforced by the considered and consistent support of such a group as few movements have brought together.

The National Committee for Mental Hygiene was the first nationally organized action in the world for a continuing warfare against mankind's most agonizing and insidious enemy. How fertile was that field and the seed that this group planted may be seen in the spread of the organized mental-hygiene movement, which now embraces 57 societies in American states and cities, national societies in 35 countries outside the United States, and the International Committee for Mental Hygiene, founded in Washington in 1930 at the time of the First International Congress on Mental Hygiene.

Not even Dr. Meyer's prophecy bounded the reach of the task that actually lay ahead. Elsewhere appears the record of organized mental-hygiene work during this quarter century: initial studies and surveys to find what no one had known—the nature and extent of mental illness and incapacity; abolition of the cruel confinement of the mentally

ill in jails and almshouses; the transformation of "insane asylums" into hospitals for the mentally ill, in the best of which the rate of recovery now compares favorably with that of some of our best general hospitals; constructive programs to salvage and socialize the feeble-minded; reinterpretation and more rational management of criminal problems in which mental pathology is a factor; organization of a protective network of child-guidance and mental-hygiene clinics to aid in preventing and checking incipient mental illness, delinquency, and other behavior problems; the slow, but mounting change in public opinion as it has absorbed our dawning understanding of the paths and bypaths of the mind.

It would be blind to assume that this initial task is complete or that to the National Committee alone belongs all the credit for the accomplishments of the past twenty-five years. The Committee has acted as a lens to concentrate and focus effort that otherwise could not have become effective. Yet even to-day there still linger vestiges of medievalism, such as the Committee's first medical director, the late Dr. Thomas W. Salmon, described in that classic, *The Insane in a County Poor Farm*. At all times the fates of the mental-hygiene movement sway back and forth with the social order of which it is a salient. During the present years of hard times, false economy is an enemy against which the lines must be held by both national and local effort. A few months ago a state board of mental hygiene appealed to physicians to limit commitments to state hospitals during the emergency to recoverable patients and patients dangerous to the community. "If some limitation of admissions is not carried out, overcrowding and decreasing budgets will reduce hospital service to an almshouse level." Vast sums have been provided in many states for the care of the mentally ill. There are as many patients in the mental institutions of the country as in those devoted to all other types of hospital. Even so, we have not yet caught up in quantity or quality of hospital and clinic provision with the needs of those of our people who have been unable to cope with the pressures of life, and the depression threatens to undo much of the progress already achieved.

In the future as in the past The National Committee for

Mental Hygiene is needed as instigator, initiator, inventor. It must continue to seek facts and make them known and understood. With a freedom not possible to any governmental agency, it can aid in proposing and evaluating new methods and techniques for the care of mental illness, such, for example, as the use of boarding homes in the community, supervised through a mental hospital, for the more economical and satisfying care of certain forms of mental disease and mental deficiency, a form of care proven successful in European practice. It must continue to serve as an active and understanding liaison agency between specialists, the public, the professions (medical, social work, educational, legal, and so on) and government. In short, if one may mix metaphors, it must continue to serve in the field of mental illness and incapacity as a lighthouse, a clearing house, and a laboratory.

## II.

Ambitious as the preceding charge may seem, it is only a small segment of the whole field which the experience of the past quarter century now lays before the organized mental-hygiene movement. The interests fused in the founding of the Committee were themselves an earnest of the spirit that has revived and redirected men's minds within the span of men still living—the spirit of scientific humanism. Stemming from Darwin's revolutionary concept of biologic evolution, there has spread out through all the disciplines of human knowledge the realization of life as growth, molded by forces without and in turn molding them for its further ends. We now see the dawning realization of the power of that concept for all the social forces relating to man: medicine, law, government, religion, industry, philanthropy—the more effective organization of our lives as individuals and as a society. To scientific medicine in general and to psychiatry in particular, these years since the Committee's founding have been nothing less than epoch-making. Here, as in physics, a thesis of dynamics is supplanting our old static philosophies and terminologies.

The original proposal of a national organization for mental hygiene and the early records speak repeatedly of the "insane." That word does not even appear in the index of

some of the most recent books in which mental-hygiene activities are discussed. The omission is more than a matter of terminology; it is the mark of a new era, when health, not disease, has become the center of our interest. That ideal was implicit in the philosophy of the Committee from the start and in the direction spurred by Dr. Salmon's leadership. But only recent years have brought us the beginning of scientific knowledge and specific techniques to realize the aim so nobly formulated in 1928 (by W. Curtis Bok) in the Preamble of The American Foundation for Mental Hygiene:

"Science takes exception to the law that only those whom Nature deems fittest shall survive. Nature has her hidden remedies for the torture of a broken mind or body, and science is upon the march in search of those remedies, that they may be rededicated to mankind. The knowledge so gained forms a sacred trust of civilization for the maintenance of the strong, for the refitting of the weak and sick to their health and opportunity, and for their deliverance to a useful life in the community and that pursuit of happiness which is the proper promise of creation."

Ten years ago Dr. C. Macfie Campbell expressed in homely language the realization that underlies our present work and future planning:

"It may not be true that we are all a little insane; it is certainly true that we all have to face the same fundamental problems of life, and the problems before which the nervous or mental patient has broken down are different only in degree from those which each cultivated man has to face."

Dr. Campbell painted a vivid picture of the multitude whose needs summoned the resources of mental hygiene:

"It is a motley group. It includes respectable bankers peevish with their wives; scrupulous housewives with immaculate and uncomfortable homes; children with night terrors and all sorts of wayward reactions; earnest reformers, intellectuals, aesthetes; delicate and refined invalids, evasive and tyrannical, with manifold symptoms and transitory dramatic episodes; patients delirious with fever, or reduced by a great variety of organic disease; patients frozen with melancholy or indulging in an orgy of exuberant activity; patients living in a fantastic world with morbid visions and communications and uncanny influences, in whose universe one sees no coherence or logical structure; patients keenly logical and argumentative, embittered, and seeing around them a hostile world with which they refuse to compromise.

"Now how can we bring order into this chaos, how can we find a path through this jungle? The answer is very simple. We have merely to discard our medieval attitude toward these sick or handicapped people, and to study the problem which they present as a problem of



human nature working under difficulties. We have to study the disordered behavior of the total organism in the same way in which we study the disordered behavior of a single organ, such as the heart."

Steps expressing the temper and inclusiveness of this view already had been taken through the pioneer mental-hygiene services in the colleges and the first demonstrations of child-guidance clinics. The active service of The National Committee for Mental Hygiene during the World War for the management of "shell shock" and other nervous and mental disorders among our soldiers had helped to bring to the psychiatrist's command an enormously increased and sharpened body of knowledge on the behavior of human nature working under stress, and experience in preventing breakdown and promoting efficiency of conduct and tranquillity of mind. This knowledge and experience stood ready for application to the less spectacular, but no less grueling individual crises of peace. There is no room here even to mention the promising experiments and accomplishments of the past dozen years in bringing the ideals and technical resources of mental hygiene to the prevention of mental disease and the preservation of mental health. Their range and scope may be gathered from the chapter headings of recent works on mental health, in which not only problems and plans, but current activities are discussed under the titles of mental hygiene and medicine, nursing, social-service agencies, delinquency and law, parental education, pre-school children, education and teacher-training, the church and theological training, industry, recreation, and other community interests.

### III.

What the next quarter century will demand of the National Committee in leadership, research, coördination, and guidance along these and other lines we cannot now foresee precisely, any more than the Committee at the start could have foreseen that these opportunities would have swung into its field. We can be sure that future progress will continue to require the unique service the Committee has rendered in the past: coöperative activity by qualified members of the professions and public leaders to bring into action our growing knowledge of the life processes of man and to protect

all of us from the unripe, specious, or self-interested proposals that have been engendered by the very rapidity of psychiatric progress and the resulting growth of popular demand. And specifically we can see several clearly marked roads leading forward.

The National Committee for Mental Hygiene will best function in the future as it has functioned in the past, as an inquirer, an initiator, as a receiver and transmitter of scientifically valid knowledge. Its concern is the common man and woman struggling against difficulties as well as the patient whose trouble has reached the breaking point. In so far as no other agency can do the task better, it must act as liaison between the specialist and the public. But the pride of past years and the promise of the future lie in the extent to which the accepted body of mental-hygiene knowledge is assimilated and incorporated, as it becomes available, into the professions, business, school, church, and other aspects of our everyday life.

We may be sure, for example, that it will not be mental-hygiene organization *per se*, but education among other forces—education of children, parents and other adults, professional workers—that will bring home most effectively to the average man the precepts of mental health. What those precepts are and will be, how inculcated in educational leaders, how best applied, how evaluated—such questions as these demand the information and effort of a national group representing those qualified to answer.

Through the Division of Psychiatric Education, the most recent department of The National Committee for Mental Hygiene, another road starts toward the future. It is the family physician who may be the first to see the patient swaying under stress, or the child whose personality is being warped by psychological mismanagement as surely and tragically as his body would be stunted by wrong feeding. The physician of the future must be trained to recognize and deal with the everyday symptoms of mental ill health. Beyond that, if he is to do the utmost for any patient, he must treat the whole man, coping with the despair or resentment that may hold back recovery in ailments as specific as tuberculosis or a leaky heart. The false division between "physical

health" and "mental health" must be broken down, so that both will be wrapped in an inclusive ideal of "health." We know, but do not yet deal with the fact that possibly half of all human disability can be attributed in considerable part to psychological and social origins, and requires for interpretation and treatment an understanding of all the mechanisms involved. One of the chief reasons why so-called mental disabilities are showing no signs of diminution is because the medical profession, aside from a relatively few specialists, so far has played so little part in dealing with these problems. Here must be continued such work as was instigated when The National Committee for Mental Hygiene brought together from all parts of the country the men best qualified to envisage and meet the need as a basis for the work of the Committee's conjoined Division of Psychiatric Education.

In man's spiritual cravings and his symptom of defeat in crime await similar needs, to be met through the church, law, and penology. Here again initial efforts demand development. The period of the Committee's work has been called the century of the child. Doubtless it will take all of a century—and more—to realize the child's due, but even now the forgotten adult must also be considered. Industry has studied the dusts and poisons that vitiate the efficiency of workers, but hardly a beginning has been made to investigate and remedy the attitudes, relationships, and conditions of work that sap vitality as surely as lead or acid. For both adults and children play has a profound significance in the development and maintenance of mental health, whose precise meaning and potentialities we have only begun to explore, much less to realize. Our records of suicide, divorce, and crime demand study in their relationships to mental well-being and leadership, engaging the efforts of the clergy, physicians, social workers, teachers, parents, and friends.

Most ambitious of all, there lies before the mental-hygiene movement a field whose nature and limits can hardly be guessed. Up to the present time mental hygiene, following the scientific process of induction, has placed its chief emphasis upon the individual, first on his sickness and disability, more recently upon his health and happiness. There still lies almost wholly untouched the influence of social fac-

tors, the mental atmosphere in which we live, the force of the beliefs, prejudices, taboos, and ideals that surround a group of people at a given time and of the social institutions they rear to serve them.

Data of sociologists on communities that breed crime as marshes once bred malaria or polluted streams typhoid fever stand in need of rigorous study and guidance for a "sanitation" of the environment—physical and mental—in which sick fancies are bred. Is it Utopian to think of mental hygiene's contribution to politics and economics, international understanding and peace, to preventing the plagues of hatred and intolerance that lurk within nations and between nations?

We believe not. The past quarter century of bold beginnings has justified the aims of protection from mental illness and promotion of mental health and the approach adopted by the Committee toward these aims: organized effort through a central group of representatives of the scientific and social professions and the lay public, drawing in and turning over to specialized social action whatever of fact and technique is appropriate to that field.

The initial task is still uncompleted in the light of what we already know, and its nature precludes its completion while the advance of science continues to bring new techniques for social testing and application. Through and beyond these means we see the dynamic possibility of promoting the happiness and efficiency of man through our new understanding of him as an organism in which "physical" and mental are parts of one whole, and our new view of the individual as a part of a social organism, drawing from it his nurture for good or evil and in turn helping to mold it by what he is. To the continuance and further development of these aims from its special viewpoint and through its special techniques, The National Committee for Mental Hygiene addresses its next quarter century of effort.

## THE FRONTIER OF THE MIND \*

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I HAVE been asked to speak to the Academy upon the general subject of the ability of man, from the point of view of his mental make-up, to go on adjusting himself to the ever and rapidly increasing complexities of the world in which he lives. I take it that the present state of confusion throughout the world has raised the question in the minds of many whether perhaps man is so constituted that there are limits to his capacity for accomplishment along those lines and whether perhaps there are indications that those limits have been reached. I shall be very glad to deal with this subject, but in order to do so, I feel that it is essential to attempt to orient you somewhat to the new ways of thinking that have affected interpretations of psychological events in recent years.

In the first place, I must tell you to begin with that the psychology that many of us were taught in our college days has in large part, and almost entirely in certain very fundamental ways, been superseded. The psychology of the nineteenth century has rapidly become of interest only from an historical standpoint, and the developments taking place now require an entirely different point of view regarding all things psychological.

In the last century the study of the mind was still more or less entangled with its associations with ethics, on the one side, and philosophy on the other; and it is only in the present century that it can be said to have become a really scientific discipline and a branch, in my estimation, of biology, which deals with certain aspects of living beings. In changing, however, in this radical way and becoming scientific, it has naturally had to break with many traditions, and these traditions still tend to find expression in the language we use and to contaminate our thinking.

\* Read at a joint meeting of the District Medical Society and the Washington Academy of Sciences, Washington, D. C., November 21, 1934.



For example, one of the problems that confronted the psychologists of yesterday was the so-called "body-mind problem": What was the relation between body and mind?

And the mere asking of the question involved the assumption that they were separate one from the other, and, further, that the mind in some way was added to the body in the process of evolution at some particular time—that it took up its habitation in some special group of living beings and maintained there an existence which was separate from that of the body and yet in a mysterious way intimately related to it. Modern psychology is no longer vexed with this problem, because the way in which we think of man now is such that a query of this sort has ceased to have meaning and, therefore, the question is no longer asked.

You will gather from what I have said that what has happened in the realm of psychology is that different ways of thinking have come about which automatically have disposed of many of the problems of the last century, but which quite characteristically have raised many new ones in their stead.

I think, therefore, that I perhaps can serve you best if I give in brief outline some of the ways in which we now look at matters psychological, and you will note how they differ from the psychology of the nineteenth century, which not only considered the mind as a separate entity, but dealt with its several faculties—intellect, emotion, and will—as if each of them had an existence of its own and controlled a certain group of phenomena, somewhat after alleged bureaucratic methods.

Present-day psychology differs in its way of thinking about the human organism very much as other disciplines have come to differ in the past few years. It looks upon the organism as a whole, and that aspect of it to which we give the name "mind" we think of as only one point of view, or one facet of a many-faceted surface to which we direct our attention. We do not conceive that mental phenomena were added somewhere in the story of evolution, but because these phenomena are only a part of or only constitute one aspect of the phenomena of living beings, this aspect was present from the first, but naturally in a manifestation as simple as the corresponding bodily structure; so that what we now call "mind" and "body," instead of being separate and dis-

inct, are merely different aspects of the living organism which have developed together throughout the story of organic evolution. For purposes of convenience, however, we may speak of the mind as such in the sense of the organism's reactions at the psychological level and describe its evolution both in the individual and in the race, and, also, it can be studied from its earliest manifestations in the lower animals. We deal with it in this way precisely as we deal with a living organism: as a dynamic, expanding group of processes, which becomes more complicated along the way as the problems it has to meet require changes in this direction.

Now this study leads us to the conclusion that what we ordinarily think of as mind—namely, what I prefer to call “conscious awareness,” or perhaps better, “self-conscious awareness”—is the last thing to occur in a long series of developments; and so it is not difficult to understand that if all the time we have been mistaking this for mind in its totality, we have necessarily reached many false conclusions regarding its ways of functioning, if for no other reason than because we have been dealing with only a small portion of the total phenomena.

Perhaps I can illustrate this by a figure of speech. We are all familiar with the modern searchlight. I have watched it many times from the deck of a river steamer at night as it played along the banks and illuminated first one and then another bit of scenery. Now the area of conscious awareness is like this small area illuminated by the searchlight. The content of the area stands out with clear definiteness. It is perceived in the form of concrete objects, and the functions in this area are equally clear-cut and definite. They constitute reasoning, judgment, discrimination, perception. But you will note that this bright spot is only a minute part of the total situation and that outside it there is a region of twilight or darkness in which we see nothing clearly—perhaps vague outlines, little more. This is the region where all clear-cut distinctions and definitions of outline are lost. This region, instead of being the region where reason functions and where clear-cut definitions and differentiations prevail, is the region of the emotions, or, speaking more generally, the feelings. It is in this zone that our instincts

manifest themselves, our intuitions have play; instead of being governed by intellectual processes, it is the region in which instinctive forces, natural desires, the avoidance of pain, the seeking of pleasure, prevail; in short, the region where the wish holds sway, unimpeded by the necessity for conforming to the limitations imposed by a world of harsh realities and natural laws. Reasoning gives way to phantasies, and things happen because we want them to. The "omnipotence of thought," as we call it, rules here supreme. Things are true because they are thought to be true, and for no other reason. It is the land of dreams and their realization. It is the region above all in which we live, as the other region is that in which we think.

Now this dark surrounding territory of indefinite extent is just as much part and parcel of the mind as the small, bright, illuminated spot. In fact it is more necessary because more fundamental; and the question that we are particularly interested in now is: How valid is the reasoning from things as they are seen in the illuminated area of the searchlight with all these forces in the background left out of consideration? I seem to have answered my question in the asking. Obviously, if we wish to arrive at true interpretations, the background against which the brightly illuminated objects are seen cannot be neglected.

Now for a moment to indicate how in the course of evolution this central nucleus of brilliant illumination has gradually become differentiated from this background of instincts and feeling. There is in all living creatures some impulse—define it as we will, we do not understand it—which insures what we are pleased to call progress, development, evolution. In the course of that evolution a number of things have happened. Those that interest us at the moment are these: In lower forms of life reproduction took place at a tremendous rate and these organisms could afford, so to speak, to make great numbers of mistakes in dealing with the forces of the environment because myriads of them could be destroyed and the species still persist. But as life attained to a more and more complicated structure in response to its adjustment to the various forces that it had to meet, these adjustments became increasingly accurate and at the same time reproduction fell off accordingly, so that finally our

capacity for adjustment has reached such a point that reproduction has only to develop single individuals where before it developed millions. This increased accuracy of adjustment is in itself almost the same thing as conscious awareness, because it involves not only clearer and more clean-cut perceptions of the situation to which it is necessary to adjust, but also the necessity of delaying immediate response, bringing into the picture the results of past experience and so further illuminating the possibilities of choice, finally reaching a conclusion that can be carried out in action which sometimes extends over many years of time. All this requires an intensity of fixation upon the specific problem of adjustment which is in itself an outstanding characteristic of that very clarity of vision which is part and parcel of conscious awareness.

Now I think—if I have succeeded in making myself clear, and I fear that perhaps I have not—that we have a picture of what we call mind as a developing organism which tends to focus in a point of clear consciousness, but which has back of that clear consciousness all the organized tendencies of the past millions of years, plus those of the individual himself, as motivating factors that modify and control what takes place at that particular locus—a situation already, you see, that involves a complexity which, if we try to visualize it, is to all intents and purposes infinite.

Such a concept naturally leads to still further and very interesting conclusions. I think it was Bergson who said that he did not know how "life insinuated itself into dead matter." Perhaps we need not undertake to answer that question here, but it would seem obvious that the laws of the cosmos, in the course of the origin and evolution of living forms, have impressed themselves upon life in such wise that these living forms have incorporated within themselves these very laws, only they are expressed under material conditions modified by the existence of what we call life. In other words, tiny man who creeps about on this planet is not the lord of creation, in spite of the fact that he still thinks he is and acts as if he were. The world within is the impress of the cosmos upon him, and if, as some of the psychologists have expressed it, man projects laws, order, meanings, upon the world, these projections are in turn but reflections of the

world's impress upon him. You will see, therefore, that I have drawn here the picture of man and the rest of the universe as acting and reacting upon each other in a process of adjustment which continues to proceed along the lines that we are accustomed to in our understanding of development and evolution.

One of the outstanding facts in the course of the recent history of man has been the realization by astronomers of individual differences as between different observers of celestial events, with the result that the so-called "personal equation" was evolved as a corrective to these differences and as an assistance to more accurate readings. It began to be appreciated then that man's observation of the world was by no means infallible. Not only were his sense organs defective, but the time of transition along his nervous pathways was not always the same; in other words, he was a very defective instrument with which to observe and record the outside world. It was not a very great step from this realization to the further one already implied in my account, that the world exists for him only as this imperfect instrument perceives it, and that, therefore, in a very real sense every individual lives in a world of his own, a world that is a little bit different from any one else's.

It has been indicated that the chance of a particular germ-plasm combination taking place is one in five million billions. In other words, each of us represented that one chance when we became ourselves. This, from a purely physical point of view, gives us some idea of what the possibilities of variation are, expressed in terms of chromosomos and genes.

Now, having developed this unique personality, different from any other that ever existed or ever will exist, we are confronted by a world which is in constant change and which bombards us with a series of sensory impressions, probably by the millions, each hour of our lives. And these impressions are received in a machine that has been built up through millions of years of evolution, as it were, for the purpose of handling this material. The human organism is a receiver, transformer, and transmitter of energy, energy that comes from all these myriad sources and is received into an organism quite as complicated as the world from which it comes. A single portion of the brain, the cerebral cortex—



a thin layer of 2 to 4 mm. in thickness covering the cerebral hemispheres—contains cells (incidentally the most complicated cell structures in the body) somewhere in the neighborhood of nine to ten billions in number.

If you will think of all these things, you will have some idea of what the possibilities are, expressible in matter and energy, with which the organism has to contend. These figures are so stupendous and at the same time so vague that they cannot have a very great deal of meaning, except that obviously there must be in this organism a plastic capacity which has enabled it to proceed thus far on its path. And I may add that as we go from points of definite structure in the organism and proceed in the direction of the last additions that have been made in the evolutionary process—namely, to the possibilities of psychological function—we are moving in a direction away from the least modifiable toward the more modifiable; and, therefore, we may expect to find—as in fact we do—that man through the years has changed more in his thinking functions than he has either in the functions of his organs or in their structures. To all intents and purposes, so far as we are concerned, man's anatomy and physiology remain fixed and unchanging facts; whereas experience teaches us, to the contrary, that psychologically he continues modifiable more or less throughout his life, though of course his modifiability is greatest in the early years.

From such facts of observation as are available to us when dealing with human beings, we know that the possibilities of modification in many instances are very considerable. And I may say merely as a result of the precipitates of experience which control my thinking, without perhaps the ability to bring concrete evidence to bear upon the subject, that there is no indication so far as I know of any limitation to this modifiable and adjustable capacity of the human being. There is, on the contrary, all along the way historical evidence that he has always been apprehensive that his adjustment would break down, that he has always seen society as an overwhelmingly complicated affair and felt that the time was coming when he could no longer keep up with the procession. This is his natural response to the pressure that is put upon him to go forward on the path of

progress. As he gets older, this pressure is felt more and more and develops contemporaneously with lessening powers of adjustment. And then Nature comes forward with her cure for this situation, and her cure is death, and the new generation takes up the problems where the old generation left them.

For example, we have to-day all those new and marvelous results in the realm of physics and mechanics and astronomy which have come about largely as a result of Professor Einstein's contributions. There are very few people in the world who are capable of understanding these results, only a handful of people in fact; but if they are true—and I take it they are—I suspect that future generations will understand them as easily as we do that the earth is round. And yet there must have been a time when the fact of the roundness of the earth was quite as difficult of comprehension to the masses of the people as the theory of relativity is to-day. But young, plastic, adjustable minds, unhampered by the prejudices of yesterday, will grasp these new concepts quickly, as they have in the past.

There has never been any question about man's adjustment to life under the seas or in the clouds, or to temperatures at the poles or the tropics. But his most difficult task is to adjust to his fellow man; and in the present century the emphasis that psychology, and particularly psychiatry, has received is an earnest for the probable development of his understanding of himself, which will in time be comparable to his understanding of the rest of the world. At the present time, of course, this is not so. It is generally conceded that his knowledge of himself is far below his knowledge of the world about him. When these two fields can be comprehended with something like equal understanding, there will be a new capacity in man for adjustment to his fellows far in excess of anything that we have ever imagined.

So much for fundamental principles. It may interest you at this point to consider with me for a few minutes what light mental disease in its various forms sheds upon the problem under discussion. In the first place, let us look at the development of our thinking from the standpoint of the way in which medicine has responded. Nineteenth-century medicine was outstandingly characterized by the develop-

ment of the various medical specialties. The accumulation of knowledge about the human organism—the way it functioned and its various diseases—progressed so rapidly that it became a rather hopeless task for individual physicians to attempt to master the whole field, and so they solved their difficulty in this respect by confining their attention to disorders of certain organs or groups of organs. You are familiar with this state of affairs. But unfortunately this development contained an inherent defect. Organs could not be adequately considered apart from the rest of the organism, and when the concept organism-as-a-whole began to develop, this fact became outstandingly clear.

Perhaps psychiatry has done more to develop this aspect of the situation than any other department of medicine because psychiatry looks upon the organism as a group of organs associated together in a common purpose, and that purpose is none other than to effect a more adequate adaptation to the environment and so to modify that environment by acting upon it as to bend it to the purposes of the organism. In other words the purpose of the organism-as-a-whole can be expressed only in psychological terms. The functions of all the organs focus in this psychological objective, and, therefore, psychiatry at once became interested in the whole individual.

This point of view receives a rather startling confirmation in the statistics of mental disease as we see them represented in our public institutions. To begin with, for the most part our mentally ill patients are not physically sick in the ordinary sense of that term. If they have deviations from the normal in their several functions, these deviations are so comparatively small that as yet we are not able either to define them or to interpret them. On the other hand, if we take the great mass of mentally ill, we do find the startling fact that, despite all our efforts to the contrary, they die at a rate something like six times greater than the general population. You see this fact confirms what I have said, and in addition it also confirms what I have implied of the organism—namely, that it is an energy system, and when the flow of energy is impeded and the necessary adjustments both within and without the organism are therefore impossible of

effecting, the organism-as-a-whole functions at a lowered efficiency and the span of life is correspondingly shortened.

Now let us see how this works in a particular situation. Let us revert to the figure of speech I used earlier of the searchlight which brightly illumines only a small spot in an otherwise uniformly dark medium. You recall that I spoke in general of the distinction between these two areas—that intelligence dominates the former and wishes the latter; and you will recall, also, that the wishes that are formulated in this dark territory express the fundamental instincts of life, and the mental processes that occur in the illuminated space represent those more accurate adjustments to the material facts and the natural laws of the environment, physical and personal, in which the individual lives. It is easy to see from this statement how tendencies in these two areas not only may be, but necessarily must be frequently opposed one to the other.

Let me imagine an example. An individual is so situated that his only source of water is a stream polluted with the germs of a deadly disease. If he drinks of the stream, he will surely die of the disease. He can preserve his life only by not drinking, but paradoxically, if he does not drink, he will die of thirst. The agony of thirst increases as the hours pass. Temptation to drink from the stream becomes intolerable. He resists it as long as possible because he knows that drinking means death. The desire to slake his thirst, to supply his organism with the necessary fluid, originates in the dark region where the instincts and the wishes govern. The fear of drinking, the apprehension of the result if he does—all these things come from the clearly visioned situation as he actually sees it in the world in which he has to live and to which he has to attempt to adapt himself. The desire that emanates from this larger region—which, in harmony with present usage, we will call the unconscious—is in conflict with the knowledge that the individual has and the fear resulting from that knowledge of death if he yields.

This, of course, is an extreme example, but it shows how a life-and-death struggle may take place between the opposing demands of these two regions of the mind. In all our nervous and mental diseases we have, among other things, a similar situation with which to deal. We have this so-called

conflict between these two great regions at the root of these disturbances, and one of the outstanding results of this conflict—which I am sure you can comprehend easily from the example that I have just given—is that the energies of the individual are used up in a futile battle and are not, therefore, available for those possible adjustments which would make for greater efficiency of living. And the problem of therapeutics at this psychological level with which we as psychiatrists are most concerned is the very problem of helping the patient to effect some kind of permanent solution—or, if not a solution, at least a compromise—with these contending forces, so that the energy engaged in the conflict may be released for more effective use.

Just a few words at this point by way of hints, so that you will have some idea how this works out actually. The cruder way in which this conflict not infrequently manifests itself is in alternating swings between the attempts to satisfy each of the two contenders in this intrapsychic conflict. And so we see that the individual lives for a certain time in accordance with his ideals and gets along very well, but during this period the tendencies from the other side are constantly nagging him. They are increasing in strength just exactly in the same way as in the example I have given you the man's thirst increased, until they finally reach a point where they have accumulated so much force by this slow process of impounding that they can no longer be restrained and they break forth, sometimes expressing themselves as the epileptic convulsion. And in this breaking forth they not infrequently express themselves in aggressive and destructive conduct. Quite characteristically this destructive conduct is addressed against the world at large. In the epileptic furor the patient spreads ruin and destruction all about him, and woe to any one who attempts to interfere with him. It is as if he were wreaking his vengeance upon a world which had created within him by various stimuli certain desires which he is incapable of fulfilling. Then, equally unfortunately, these same aggressive and destructive instincts are turned upon himself, and he would destroy those very parts of his body through which these stimuli to which he cannot respond transmitted themselves. And so we find patients mutilating themselves in the most hideous manner, digging out their



eyes, biting off their tongues, castrating themselves, and finally, sometimes by the most painful methods, committing that final act, complete and irrevocable, of self-destruction. These are just some of the more terrible things that we see when serious disharmony affects the organism in the ways that I have described and that result in destroying its efficiency, and even its life.

Perhaps with the background thus far developed I can indicate very briefly another point of view, which you may find interesting, but which I must warn you, to begin with, is largely speculative. You will see as I have developed my thesis that I have pictured an organism all the several parts of which are constructed for a common purpose, and that purpose finds its full expression only as it heads up in the tendencies that come to expression in the functions of the mind. In addition to that, the implication seems fairly evident, if I have correctly indicated the forces involved in the functioning and purposes of the organism, that this organism is growing, expanding, developing, evolving at this head end, not unlike, by analogy—but of course in a very much simpler situation—the way that the root of a plant develops through the intermediation of the root tip.

The further implication of this point of view is that the experience to which the living being is subjected by this constant necessity for adjusting to the environment, and which experience has been in process of evolving through living organisms now for millions of years, is gradually, just as we see it in the growth of the individual organism, laid down in what amounts to permanent structural details. In other words, when a given necessity becomes of survival value, the function that satisfies that necessity is precipitated, as it were, in the form of organic structure. Thus we have at the heart of each organism certain definite, well-defined structures that vary only within narrow limits as between individuals and that represent the answers, so to speak, which the organism has developed in its response to the queries presented to it by the environment through the ages.

In order that this process of adaptation may continue, not only from generation to generation, but from youth to old age, there has to be a certain retained plasticity on the part of the organism, a certain possibility of change; and this

possibility, as I have indicated, is greatest when we come to the more recently acquired adaptations, as they are expressed in the functions of the mind. Without laboring this point further, let me draw the conclusion, which might be supported by a great deal of concrete evidence, that this modifiable aspect of the organism represents a strategic point of attack which offers a possibility of modification; and, therefore, when the organism is functioning inadequately, it is not beyond the possibilities to look forward from our present knowledge to a time when the field of psychotherapy will be much larger than it is now, when illnesses will be attacked from this angle much more frequently than they are at the present time, and when much of the therapy that is now addressed directly to the soma, the more definitely fixed portions of the organism, will go out of use, and, correspondingly, therapy addressed to the psyche, the more modifiable forms, will come into practice.

I have given you in this brief paper, first, a discussion of the fundamentals from which we must proceed if we are to answer the question as to how far we may expect man to go in the future; second, some illustrations as to how the forces at his disposal may be distorted and impaired in their utilization; and third, a suggested view of the future. From all of these three points of view I gather a definite feeling: that the greatest asset of man to-day is his mind and that the greatest unexplored and largely unknown territory in all the world, so far as we know, is this same region. So I feel to-day that we are entering upon a new chapter in the history of human development, that we are pressing forward into the unknown along a new frontier of great and apparently inexhaustible riches, and that frontier is the frontier of the mind.

Now just a few words with regard to this frontier territory that we are only beginning to enter upon. What is it like, and what may we expect to find in it? I may reply very generally by saying that it is very much like all frontiers. The explorer who has pushed his way into a new country must always be prepared to meet with hardships and dangers, and the reward of the frontiersman is in proportion to his ability to overcome these obstacles. Extremes of temperature, floods and drouths, great forests and wild animals, to

say nothing of tribes of savage men who look upon him as an enemy, represent the types of difficulty he has to meet. But if he succeeds, he is rewarded by the fertility of an untilled land and the richness of unexploited deposits of precious metals and the like.

It is the same, so far as we know, with this unexplored region of the mind. As soon as we begin to search earnestly, systematically, and assiduously in this territory, we find all the terrors and all the obstacles that belong to unsettled and uncivilized regions; and here, as elsewhere, it takes courage to press forward, for, quite contrary to the assumptions which are tacitly made regarding the nature of man, the things that are found are often too terrible to be acknowledged, much less studied and understood. Man is neither wholly angel nor wholly devil, but both aspects are intertwined in his character; and just as his capacity for good is very great, so is his capacity for evil.

Man prefers to think of himself without these handicapping qualities of which he is not at all proud, and so he lives in a hypocritical atmosphere of self-adulation much of the time. A little thought of the story of man as he has come to be what he is would make it perfectly understandable why these characteristics still cling to him. It is only a very little while ago, comparatively, in the story of his life on earth, that he himself was a savage, and this savage state existed for hundreds of thousands of years. And before that he was an animal, and that stage lasted much longer. The characteristics of these stages were essentially animalistic, and if he has arrived at what we are pleased to call civilization, it is only because he has been able to survive; and if he has been able to survive, it is only because through these ages he has been willing to kill. He has reached his present estate literally by leaving a trail of blood behind him, and naturally we must expect to find at least the remnants of these destructive and aggressive qualities which I have already intimated exist and which I now say characterize him in large part.

The frontiersman, if he wishes to conquer nature, must have the courage of his convictions. He must be willing to face the dangers that are in his path. It is precisely the same with ourselves. We cannot alter ourselves, or reach higher stages of civilization by ignoring our own characteristics.

We must appreciate and understand them if we are to deal with them intelligently, overcome them, capture the energies that now are dissipated in their destructive activities and conserve them for socially useful and acceptable ends. And this method of procedure requires work, hard work, continuous work, in order that it may yield valuable results. The frontiersman lived a hard life, but if he succeeded, he reaped untold material riches as well as health and happiness; for it is written: "In the sweat of thy face shalt thou eat bread." The difference here from the popular conception is that the real dangers that confront him come from within. The thing in all the world that man is most afraid of is himself, the forces that are in him and that, if let loose, would express themselves in destruction, ultimately destruction of himself. This you will be able to realize when I suggest that the three great crimes of which man has been guilty through the ages, the crimes that are not made by statute, but that are, as the lawyers say, "evil in themselves"—murder, incest, and cannibalism—are still with us. I do not need to convince you that murder is by no means a lost art. We only have to think of the last war and to read the newspapers. With incest, of course, few of you, I am sure, have had any contact; but those of us who deal with the illnesses of people, and their defects, know that it is far from rare; while cannibalism still exists in remote places and occasionally crops out at our own level of culture under peculiar conditions of stress.

It would perhaps be strange if this were not so, for after all, the patterns in which man has expressed his fear, his hate, and his aggressive and destructive tendencies are probably pretty well a part of our fundamental make-up, which we have carried through the centuries and which is still with us even though buried deep in our natures. Therefore, I am sure, you can understand with what good cause man should be afraid of himself, afraid lest these instinctive tendencies should be let loose and fall into their accustomed patterns of expression.

When we come to the content of our psychic life, we find that for the most part we are quite oblivious of anything that is not within the circle of clear conscious awareness; but those of us who are sufficiently honest and sufficiently brave, who

really and truly examine our own thinking and feeling processes, are aware that on the fringe of this brightly illuminated area quite a good many things are happening of which we ordinarily do not take account.

Perhaps one of the most significant symptoms and one of the most widely dispersed is anxiety, and this symptom of anxiety comes into the picture whenever our safety and security are in any sense jeopardized. It is the red light that warns us of danger, danger from within and danger of the particular character that I have mentioned—namely, that the instinctive forces will break through the barriers that civilization has erected and carry destruction with them. In fact, it would seem that the growth of civilization and the various institutions that have been erected as means by which mankind comes to a more effective handling of his environment are all of them, in a sense at least, the result of reactions calculated to protect the individual from anxiety, and that we progress along the path of evolution and development rather timorously, one might say, afraid all the time, threatened from forces both within and without, constantly strengthening our position and seeking always for safety, permanency, and equilibrium, goals that can never be attained, but that, as a result of our continuous seeking, bring to pass constantly improved methods of adjustment. Every success, every overcoming of an obstacle, every solution of a problem, makes possible new successes, new obstacles to be overcome, and new problems which must be met. So that we have a never-ending process of which we are a part. We must always go forward. We are on the treadmill of life and we must advance or die. Anxiety is one of the symptoms which indicate this mechanism, so that we are beginning to see, at least vaguely, what it is that makes the machine work; of course, not really and fundamentally, perhaps, but at least we get the hint.

All these things that I have said to you have grown out of the suggestions which the newer developments in our field have thrown up with regard to some of the age-old questions that have confronted us. As I have already indicated, my feeling is that we are on the verge of an entirely new era in the development of our understanding of ourselves,



and that the outstanding characteristic of this new era will be our ability to ask of the organism a certain type of question which we are only beginning to be able to formulate. In other words, we have studied the details of the functioning of the organism now these many years. We are beginning to see back of these details something that we recognize as the totality of the organism itself, and we have accumulated enough knowledge of this totality by the investigation of these details to be able to begin to take the next step, which is to ask intelligent questions of this organism which will give some information about it.

If I have done nothing else, I hope I have convinced you that at least I think that we are a long, long way from having exhausted the possibilities of this region of the frontier of the mind; in fact that we are just entering upon a vast territory which will be many, many years in the frontier stage of development, and that the winning of this territory holds out the prospect that for the first time man will really have come to some understanding of himself, based upon accepted principles of science.

## PSYCHOLOGY AND EDUCATION \*

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PSYCHOLOGY and education have always been felt to be near of kin. Many great psychological ideas are rooted in educational attempts and many educational reforms have been fostered by psychological considerations. Both have a common concern—man. But in spite of that relationship, psychology and education, at least when clearly conceived, have different aims. Education is the endeavor to change or mold a person's ability through the training of his mental and moral powers, which generally consists in the coöperation of study, discipline, and the experiences of life. The human mind, therefore, is for the educator something that is valuable not only in so far as it exists, but also in so far as it develops and transcends itself or as it is related to objects that have a quality of values. For the educator the mind of a person is only one focus of an ellipse, the other focus of which is what we might call the culture of a group of men in a given period. The geometrical analogy is wrong only in so far as neither of these points is static, but both are dynamic and parts of a dynamic system. Education, therefore, not only connects the individual with something that can be learned, with a certain amount of knowledge, or with a fixed and well-defined realm of values, but it throws the individual into the midst of all the changes and uncertainties of a culture that reaches from the simplest techniques of living and learning to the conflicts of ethical and political ideals and to the abysses of speculation. One might perhaps risk the paradox that the more profound the educational process, the more difficult it is to get truth, peace, and happiness in the usual sense of the words.

It is quite natural, therefore, that education, in its difficult and responsible situation, should have tried to get the sup-

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port of sciences or of theories that seemed to guarantee a greater security. Two ways were open. One was to analyze the aims of education. Education has, therefore, always been concerned with ethics and religion and in our modern period with sociology. The other way was the analysis of man, and especially of the child and his relation to the educational process. Along this latter line education has attempted on the one hand to develop a theory of methods of teaching and learning, while on the other hand it has tried to profit from the theory of the organism and of the functions of the human mind and its reactions to its environment—that is, from psychology.

The hope of the educator in turning toward psychology was that a deeper insight into the psychic functions that underlie the growth and change of the individual might produce a more scientific regulation of educational procedure. One might perhaps, without distorting the truth, find a correlation between a decrease of belief in definite aims and values in education and an increase in psychological tendencies in education. It is certainly not an accident that the first man who connected education with a kind of psychology, Socrates, lived at the beginning of the disintegration of Greek folklore, in the period of the Sophists.

The hopes of the educators have not been unfulfilled so far as they are related to the biological or medical branch of psychology. Psychological experimentation has helped us to understand the conditions of attention, distraction, or fatigue, the relation between physical constitution and psychic disposition, and the influence of physical defects on learning. The educational work of many child specialists in our families ought not to be forgotten. The modern care of problem children is a result of the coöperation of this type of psychology with education, and last, but not least, the psychology of infancy and of other periods of human life has to a large extent refined our educational methods.

But this experimental or medical branch of educational psychology is relatively young; it is a result of the growth of the natural sciences in the eighteenth and especially in the nineteenth century. We perceive here, in the history of the relation between education and psychology, a fact that we generally observe in the history of human thought—that

thinking often begins with the more complicated and abstract problems. Therefore, also, the simplification and the reduction of educational assumptions on a natural basis or as a result of experiment is a relatively late development. And, furthermore, there are as a matter of fact many problems in the education and culture of mankind which cannot be tested by experiment, because they result from the interaction between conscious, unconscious, and subconscious mental powers and the whole vast environment of the human race.

The earliest branch of educational psychology, therefore—a branch that is still very important—is not the experimental or medical phase, but the attempt to understand the human being in its educational and cultural frame through a process of introspection or self-analysis.

If we understand psychology to have this broader meaning, the history of the coöperation between education and psychology is as old as a conscious and deliberate theory of the education of the individual. When Socrates goes with his friends to the Agora and discusses with them how to lead man to the knowledge of good and evil, when he speaks of the *maieutic* art (the midwife's art) of the good teacher who helps his student to bring to his consciousness the innate ethical ideas that lie as latent potentialities in every man, then he uses a kind of introspective, or we might also say, with a freer application of the concept, a kind of positive psychoanalytical method. And if we go through the history of education, we find that there is no great new event that is not accompanied by new insights into the nature of the human mind. Even the gigantic educational work of the Catholic Church in the Middle Ages, which from our modern point of view seems to be very unpsychological, can be described as going in opposite directions: In the one direction it leads man far from himself toward transcendental values. Acquaintance with these transcendental speculations, resulting from a mixture of the teaching of Christ with the Neo-Platonic and other philosophies of late antiquity, helps the peoples after the migration of the nations to an enormous realization and refinement of their cultural qualities. It leads man not only far from himself, but at the same time deeper into himself. As a sign of this refinement we may note that around the year 1400 Pietro Paolo Vergerius, who had already had some predecessors in

earlier decades, criticized the extremely hard punishments usual in the education of the Middle Ages as unpsychological and uneducational.

In the transition period from the Middle Ages to our modern time, the Italian humanist, Vittorino da Feltre, founded at Mantua a school which enjoyed the name Casa Giocosa, the Cheerful School. And that was only one of the many educational consequences of a new appreciation of the human soul and of human nature which we observe in the whole period of the Renaissance. And if it were not my purpose to speak here of the relation between education and the more modern psychology, one might easily show not only how Luther and the great Catholic reformer, Ludovico Vives, how Comenius and Locke, Rousseau and Pestalozzi, Herbart and Froebel showed to mankind new aims of education, but also how at the same time there was in the minds of these geniuses a productive interrelation between the aims they stated and their points of view on the psychology of man.

Now we can see how at the end of the eighteenth century this development of educational philosophy relies not alone upon mere intuition and introspection, but tries more and more to make use of a gradually growing discipline, which we may consider as an independent psychology of man. It was not yet an experimental psychology in our modern sense, but it was largely based on a profound interest in the relation between the physical constitution and the mental qualities of man. And as it is not an accident that Socrates taught in the period of the Sophists, so it is not an accident that the great Swiss educator, Johann Heinrich Pestalozzi (1746-1827), grew out of a circle in the Swiss city of Zurich, in which a man like Lavater, the author of a theory of physiognomy, played a decisive rôle. Pestalozzi begins later one of his profoundest writings concerning a philosophy of education with the appeal:

"Man who is one and the same whether on a throne or in a cottage, what in his innermost nature is he? Why do not the wise tell us? Why do not the most highly endowed of the human race learn what man really is? Does the peasant make use of his ox without studying him? Does not the herdsman seek to familiarize himself with the nature of his sheep?

"What man is, what his needs are, what elevates and what degrades him, what invigorates and what weakens him, that is what it is necessary for the highest and for the humblest to know.



"Men feel the need of this everywhere. Everywhere man is toiling and straining and struggling upward. Because of lack of this knowledge successive generations wither away with their lives unfulfilled, and at the end of life the majority of mankind cry aloud that the completion of their course has not satisfied them. Their end is not the ripening of the perfect fruit which, having completed the predestined course of development, sinks to the rest of the winter."<sup>1</sup>

And in a first short sketch of another philosophic work, Pestalozzi, who generally read very little, refers to a book of the physician Plater, called *Anthropology*.

Pestalozzi was also very much impressed by the sociopolitical and socio-philosophical studies of some of his teachers and friends at Zurich. One has here an example of my previous statement that education in its progress *transcends* more and more, not only psychology, but also sociological disciplines. And while during the next decades one branch of educational thought under the influence of the German idealistic philosophy deals more exclusively with the theory of aims, another branch of education continues to connect education with the psychological ideas of physicians. In Germany a physician of Dresden, Carus, whose work was long forgotten and is just now being rediscovered, ought to be mentioned in this connection. And it is perhaps worth while to note that at the same time one of the first professors, or perhaps the first professor, of psychiatry at the University of Leipzig, Christian August Heinroth (1773-1843),<sup>2</sup> tried to connect his psychiatric interests with emphatic religiousness and a consequent theory of education. One of his many books, with the title, *Über Erziehung und Selbstbildung*,<sup>3</sup> was translated into English, and the President of Harvard University, James Walker, presented it to the library of the university. It is difficult to say whether he considered it of such great value that the professors and students of Harvard ought to read it, or whether it bored him so much that he did not care to keep it in his own library. In any case, when the author of this article found it a few weeks ago, some of the pages were not yet cut.

<sup>1</sup> *The Evening Hours of a Hermit, 1780*, in Lewis Flint Anderson's *Pestalozzi*. New York: McGraw-Hill Book Company, 1931. Pp. 12-13.

<sup>2</sup> Heinroth also wrote an *Anthropologie*. His books show his close relation to the philosophy of Schelling.

<sup>3</sup> *On Education and Self-Development*. Based upon physical, intellectual, moral, and religious principles.

But whatever may be the fate of the books of a single author—*habent sua fata libelli*—the coöperation between psychology, especially the new experimental psychology (which in the second half of the nineteenth century became more and more an important discipline) and education became closer. In Germany, after the pioneer work of Wilhelm Fechner, the psychological institute of Wilhelm Wundt influenced not only German educators, but also many American scholars who connected his methods with the educational thought of the United States. In this period, to give only one example, G. Stanley Hall, after his return from Europe in 1882, gave a course of lectures to Boston teachers, sanctioned in a semi-official way by President Eliot of Harvard University. Hall's teaching helped to bring on the conflict with the ruling theory of education based on the philosophy of Hegel and already modified by the influence of Herbart.<sup>1</sup> In the beginning of the twentieth century, Stanley Hall applied the principles of genetic psychology to child study and the problem of the school curriculum. A very intensive exchange of ideas began between American and German educators, especially between Dewey, Münsterberg, and Kerschensteiner, and the specifically American philosophy of pragmatism, with its emphasis on evolutionary and psychological views, gradually supplanted the more deductive Hegelian and Herbartian school in the United States, while in Europe the psychological approach, in spite of its generally acknowledged importance, never pushed away the philosophical interpretations of education. Both sides developed at the same time, partly coöperating, partly conflicting with each other in the production of new ideas, and both were not infrequently in strong contrast with their predecessors of the nineteenth century.

But while the philosophical theories of education no longer exercised such a strong influence on America as in the nineteenth century, certain medical branches of psychology became famous, not only in Europe, but also in the United States, especially psychoanalysis and other branches of the great field of mental hygiene. And now in many cases it is impossible to say whether this or that educational theory is

<sup>1</sup> See *Great Teachers and Mental Health: A Study of Seven Educational Hygienists*, by William H. Burnham. New York: D. Appleton and Company, 1926. Pp. 208, 212.

based more on introspective or philosophic methods or on frankly empirical and medical observations. Generally we may conclude that educational thought, beginning with Socrates' introspective theory of "Know Thyself," has attempted more and more to establish itself by connecting its methods of procedure with empirical observations as attainable by psychological or medical experiments. We have on the one hand an important field of modern medicine which assists education as an independent co-worker, just as an experienced physician assists a family of which he takes care. This is the branch of medical psychology that deals with the physical presuppositions of educational success and that we described at the beginning of this address. On the other hand we have the important, old development of educational thought which emphasizes partly the more deductive philosophical, partly the more psychological side. But all modern educational theories, if they do not want to be criticized as a mere amateurish beginning, must take into account the results, not only of introspective, but also of empirical psychology.

But now a question emerges: Has this gradually increasing coöperation of education and psychology, caused by the endeavor of educators to steer their ship from the uncertainty of philosophic speculations into the safer harbor of empirical science—has this coöperation really brought about the desired result?

Here a simple and unequivocal answer is impossible. For all those who have perhaps hoped to get positive and definite answers concerning the values and aims of education, the answer is in the negative. Compared with earlier periods of mankind, which at least believed that they had a firm foundation of educational aims, our present culture suffers from being split into a surprising variety of factions. There are nearly as many educational tendencies as there are spiritual or political or social movements.

Religious points of view, as fostered by Catholics or Protestants, in European countries struggle against a more naturalistic concept of education; and as the various religious or philosophic movements try to influence the educator and the school, so also the various political parties try to use education as an instrument for their purposes. We have a

conservative, a liberal, a more or less collectivistic point of view in education, as we have the same or similar conceptions in the political field; a Fascistic or a Bolshevistic state produces another educational system, as does a democracy.

And it is very instructive to see that all these different tendencies not only profess to have the right values and aims of education, but that they also profess to have the right psychology. If you go to the Catholic or to the Protestant side, you are presented with a very elaborate psychology; if you look into the textbooks or educational writings of the Fascists or Bolsheviks, you find them as much related to certain psychological convictions as the progressive-school movements in liberal countries. Every faction maintains that it regulates the educational process, not from without, but from within and according to the imminent psychological nature of the child and of society.

This fact shows, first, that educational aims vary to a large extent according to the aims of dominant groups in a given society, a statement that should not be interpreted to mean that all our ethical notions are dependent only upon our environment. But it shows also that psychology has failed to give to educators the degree of inner security that they hoped to win as a support and a shelter against the insecurity from which they have suffered as long as they have existed. Only the psychologist who is a physician and who restricts himself to helping children or educators to correct or to observe the physical prerequisites of the educational process remains on a relatively firm ground according to the results of the empirical medical tradition. The moment the psychologist, even if he starts from a biological basis, moves toward the shore where the relation between education and culture begins, or the moment the educator uses psychology in relation to the totality of his aims, then they both throw psychology into the discussions and controversies with regard to values, and the values are not directed by the psychology, but the psychology—at least to a large extent—by the values.

Now one might perhaps ask: Has the coöperation between psychology and education been worth while if this coöperation has not helped education to clarify its aims and has only confused psychology? Such a question could be based only on

two mistaken assumptions which, it is true, are not unpopular to-day.

The first of these fallacies is the widespread idea that it is possible for mankind to *have* the truth instead of continually seeking the truth. This fallacy first tempts large groups to expect from science more than it can give, and then, when disillusionment has come, it often tempts the same type of people to turn to an entirely anti-rationalistic attitude and to succumb to mysticism and all kinds of substitute religions, on the one hand, or to a sceptical relativism, on the other. This relativism does not see that of course the contents of truth and of many other ethical values change in different periods, but that these contents would not permanently change if there were not a permanent tendency in mankind directed by an ideal of truth and other values. And to forget or to deny the tendency because the contents change, not only produces a helpless theoretical scepticism, but leads us back to barbarous forms of ethical and cultural regression which we always can observe in some parts of the world.

The other fallacy, also a widespread one, is due to an insufficient insight into the methodological presuppositions of the natural or biological sciences, on the one hand, and of the humanistic sciences, on the other. It is wrong to make too sharp a division between the natural and the humanistic sciences and to deny that the two aspects cannot foster each other, as did German Neo-Kantianism around 1900 in its struggle against the confusion of methods. But it is also wrong to assume that the extent of cultural life, related as it is not only to the physical, but also to the ethical, æsthetic, intellectual, and emotional sides of life, can be covered by categories taken from the analysis of material nature. On the one hand, such a misconception necessarily leads to the error committed by certain European physicians who thought that they had said enough about a work of art when they stated that the artist had probably once suffered from a sexual disease. It is important for the biographer to know this and it tells us something, but it says very little about the work of art itself, about the beauty of its form and the profundity of its conception. On the other hand, the same mistake is made when educators believe that they have stated the main problems of education, or have opened up a new era in edu-



cation, when they base their educational procedure on a new branch of psychology which they consider to be "empirical."<sup>1</sup> Let us grant—and we are always glad to do so—that this psychology in which the teacher believes has really found something absolutely true. But the teacher himself makes education poorer and does not even foster the progress of psychology if he forgets that education has not only to do with the psychology of the child, but that it has at the same time to span the gap between the child and the values of culture, which are the result of very different components, of the intercourse between individual adults, groups, and nations, and which do not grow out of the mind of the child alone.

It is due to this one-sided concept of the task of education that ideas which come from new psychological insights and which are of the greatest value when properly fitted into a profound understanding of the educational process, while they have been productive or helpful in one respect, have been disadvantageous in another. If I am not mistaken, we are now living in a critical period of education when it is good to see these facts as clearly as possible.

Nothing, perhaps, has fostered modern education more than the new understanding of the psychology of youth, of childhood and of adolescence. A new notion of the creative abilities of the child, a refinement of methods, the fruitful combination of mental hygiene with education have resulted. We cannot be grateful enough for what has been done in these fields. Not enough has yet been done, and enough can never be done. But, on the other hand, a neutral and penetrating observer of our modern education might perhaps conclude that, in spite of the progress of certain educational methods, our conception of education as a whole, embodied in the great tasks and duties of human society, shows a loss of comprehensiveness and profundity when compared with the conceptions of periods on which many of us look with a feeling of superiority or scorn. He would perhaps say that the writings of Rousseau and Pestalozzi, Goethe or Herbart, or, on the American side, of less theoretical and more practical

<sup>1</sup> By "new psychology" Americans mean not infrequently special modern dynamic psychologies, such as psychoanalysis, etc. In this article those psychological doctrines are called new which are relatively new compared with older ones, which are, let us say, contemporary.

men like Benjamin Franklin or Jefferson or Barnard, naturally contain many outmoded details, but that, seen as a whole, the ideas of these leaders reveal such a profound philosophy of the relation between education and the history of mankind that we have no reason to feel that there is nothing to be learned from them. The idea of education as a process of unfolding the child is based on extremely productive biopsychological considerations. It is a very necessary protest against the pietistic interpretation of the ideas of original sin, individual sin, and guilt, an interpretation that in education, as everywhere, has proved to be more destructive than constructive. But modern education is now too easily induced to neglect the fact that there are in life persistent and transcendental directions toward greater finalities which cannot be sufficiently explained by the interests of the single man himself—that there are in reality things like sin, guilt, and sacrifice. And a man or a society which does not see that the process of building a person or a nation is a dialectic one, in which unfolding and resistance must work together, constructs a wrong analogy between the growth of plants and that of human beings. Such an analogy creates an idea of freedom, of happiness, and of unfolding which destroys its own values because they cannot exist without the consciousness of duty, sacrifice, and guilt. The concepts of freedom were endangered by a magic transcendentalism of so-called revealed values which were imposed upon mankind with fire and sword. But though on the one hand religious wars were made, witches were burned, and the healthy growth of children was handicapped, we can see on the other hand that the supplanting of purified spiritual values by mere biological conceptions also leads to barbarism and persecution—toward tyranny instead of toward freedom.

It is interesting to note that the philosopher who to-day is very often quoted by the representatives of a biological interpretation of the growth of the individual and of society, Friedrich Nietzsche, thinks very differently from many of his admirers. Nietzsche, who glorified the will-to-power and who criticized more severely than any one else the unhealthy tendency to spoil the happiness and enjoyment of life with sentiments of sin and guilt, also writes:

"In hardship there is as much wisdom as in joy: hardship belongs like joy to the great powers which preserve the race. If hardship did not so, it would have perished long ago. That it makes pain, is not an argument against hardship; it is its essence."<sup>1</sup>

Now it would be ridiculous to maintain that those progressive educators who have based their work and their philosophy on the psychological nature of the child intend to deprive education or culture of those values the productivity of which lies in deeper grounds of life than in mere happiness. On the contrary, there is perhaps no group with so radical a belief in the immanent perfectibility of man. But only such a conception of education can be held to be comprehensive which sees the whole complexity and contradictoriness of life, in which the younger generation especially will have to exist and with which they will have to struggle if they are to become adults. Only a conception of education that adds to the understanding and psychology of the child the understanding and psychology of life and of the fate of mankind as a whole can achieve mental hygiene in education, so that there is no one-sidedness, but a coöperation of all the factors necessary for the process of culture. But in viewing present-day education one sometimes has the feeling that the emphasis on the rights of the child prevents us from seeing that we live rather inattentively with respect to the values and aims of education; in other words, we feast on an old ethical heritage of Christianity, humanism, and idealism, without remembering that even the greatest heritage must perish if its heirs do not always build it anew.

But what can we do in order to enjoy the fruits of the coöperation between psychology and education without the danger of too great hopes which can result only in disillusionment, or of too great one-sidedness, which only brings about a reaction of an equal or even greater one-sidedness? The answer lies in what we have already said.

First, in both fields, in psychology as well as in education, we must constantly develop a finer feeling for the methodological presuppositions of our work. We must try to find out what degree of certainty we can attach to psychological observations themselves, and especially with what degree of certainty we can transfer them into the field of education. We very

1. *Fröhliche Wissenschaft*, par. 318.

often observe that the progress and the reputation of a scientific work is handicapped rather than fostered by a certain type of half-informed adherent. The degree of certainty that careful modern scientists attach to "exact experimentation" is less than it was ten years ago, and it is much less than the confidence that laymen very often have in scientific observations, which seem to them surprising and effective.

Modern medical psychology to-day shows that the alleged contrast between experiment and philosophy can no longer mean that the empirical analysis of organic life and the question of its sense and meaning are to be kept separate. We have the interesting fact that refinement and specialization of the methods of science lead to an integration and synthesis of bio-psychological and philosophical thinking. In this connection a book by the former professor of psychiatry at the University of Berlin, Kurt Goldstein, which has just been published under the title *Der Aufbau des Organismus* (*The Building of the Organism*),<sup>1</sup> is of outstanding value. The book shows how much a modern psychiatrist, basing his ideas on very detailed clinical observations, feels obliged to take into account philosophical considerations in his biological views in order to understand what a living organism is. The clearer the methodological conceptions and the more thoughtful the experimentation, the clearer the understanding that only more comprehensive and essential speculations as to the fundamental nature of being allow us to understand the single phenomena and phases of life. If one considers this development of thought, one may be inclined to believe that the period of philosophy, education, and anthropology, to which I referred in connection with Pestalozzi and Carus, may still be of value, not only for our philosophical and educational, but also for our biological thinking. The influence of one of the greatest philosophers of this period, Friedrich Wilhelm Joseph Schelling, on natural scientists and physicians, such as Carus and many others, is to-day considered a great misfortune, and rightly so, because the rather mystic ideas of this thinker could not be examined in his time in the light of a sufficiently developed empiricism. But it may be that the natural sciences,

<sup>1</sup> *Der Aufbau Organismus; Einführung in die Biologie unter besonderer Berücksichtigung der Erfahrungen am Kranken Menschen*, by Kurt Goldstein. Haag: Martinus Nijhoff, 1934.

after a period of experimentation, will show that some of the fundamental ideas of Schelling's philosophy of identity between nature and spirit are not entirely worthless. And it may be that the future will create a new "anthropology" on a different level from that at the beginning of the nineteenth century, but combining all the sciences that have to do with man in the broadest sense, for the common purpose of understanding the nature and the growth of human beings as comprehensively as possible.<sup>1</sup>

For our subject all these new developments in method have an important result. The clarifying of scientific method shows that empirical psychology and biology can neither allow the educator to escape from the philosophical implications of education nor encourage him to get "exact" answers from other fields of scientific research. Wherever we are concerned with life and growth, the question of the meaning of life and other problems arise. And educators who believe that scientific educational development can omit the theory of aims and of the meaning of education and rely more and more on bio-psychological research may some day be surprised to find that the "exact" sciences are already more deeply involved in and more thoroughly convinced of the necessity of philosophic problems than the educators themselves.

The second demand is simply a consequence of the first. An educator should not be content to know merely the techniques and tricks of his work and popular current ideas. An educator should seek the support of empirical psychology, medicine, mental hygiene, and other sciences, but to do so he must be able to compare the ideas of such sciences with history and tradition and with a comprehensive background of fundamentals, immanent principles, and the aims of education. Otherwise we will always find that scientific movements which are of greatest value in the progress of thought become a fad or a kind of new religion. It would have been much better for the testing movement if the ideas of the scholars who investigated the problem of measurement had been applied by their followers with more prudence. It would have

<sup>1</sup> A philosophic approach to similar problems is found in the lectures on "A Theory of Man," which the former professor of philosophy at the University of Frankfurt, Paul Tillich, is giving at the Union Theological Seminary in New York.



been better for psychoanalysis in Europe if experienced physicians and experienced educators had had a longer time to coöperate without too much popularization and advertisement from without. And it would have been better for our progressive schools if there had been more people who fitted the ideas of the free unfolding of the child soundly into a comprehensive philosophy of the problem of authority, of knowledge, and other facts. In all these cases there is danger that the voices of the experienced leaders of the above mentioned movements may not be heard by the inexperienced followers or by the reaction. There is danger now that the pendulum may swing too far in the other direction and that we may need years to get again a sound balance and a productive appreciation of what the scientific leaders of these movements really intended. And there are, to correct myself, not only signs of danger, but there are already many cases in which a thoughtless reaction against this or that of the described movements has become a hard reality, ignoring the good things that these movements have produced, and eager to point out the weaknesses.

Let us, at the end of these considerations, indicate the demand for a philosophy of education and for a teacher able to understand the philosophic principles of his work by a short reference to one of your most outstanding educators, John Dewey. In his earlier writings, especially in his *Democracy and Education*<sup>1</sup> in 1916, Dewey emphasizes the notion of growth as the fundamental concept of education and is inclined to criticize philosophers, such as Plato or Hegel or Herbart, because they have talked too much about the fixed aims of education, Dewey assuming that these aims are rather static than dynamic, a kind of ready-made scheme. He is right to a certain extent, although one cannot deny that he himself does not give a satisfactory philosophy of aims and that his work has perhaps tempted American teachers to believe in a relativity of values and to neglect the theory of the objectives of education in favor of a more bio-psychological attitude. Dewey writes for instance: "Since growth is the characteristic of life, education is all one with growing; it has no end beyond itself. The criterion of the value of school education is the extent in which it creates a desire for

<sup>1</sup> *Democracy and Education*, p. 62.

continued growth and supplies means for making the desire effective in fact."

But in his more recent writings Dewey takes the question of aims more and more seriously. Of course he still, and correctly, emphasizes that these aims cannot be described by fixed and static terms. He demands an "imaginative vision," without explaining exactly how his own "imaginative vision," tending toward a "social aim" of education, toward the "will to coöperate," is distinguished from the notions of earlier thinkers whose philosophies of aims he had attacked as vague ideas.

He now writes, in an article in *The New Era* (November, 1934):

"It is true that the aim of education is development of individuals to the utmost of their potentialities. But this statement in isolation leaves unanswered the question as to what is the measure of the development."

And in another paragraph of the same article he states that teachers "are inclined to take the individual traits that are showing themselves as finalities instead of possibilities which by suitable direction can be transformed into something of greater significance, value, and effectiveness. There is still current in many quarters the idea that evolution and development are simply matters of unfolding from within and that the unfolding will take place almost automatically if hands are kept off. This point of view is natural as a reaction from the manifest evils of external imposition. But there is an alternative; and this alternative is not just a middle course or compromise between the two procedures. It is something radically different from either. Existing likes and powers are to be treated as possibilities, as starting points that are absolutely necessary for any healthy development. But development involves a point *toward* which as well as *from* which; it involves constant movement in a given direction."

Now here again we do not need to argue whether this "given direction" can be fixed by an "imaginative vision" of the "will to coöperate" or whether we need instead of it something more—for instance, an answer to the question, toward what goal we shall coöperate.

The main point that these quotations from two different periods of Dewey's philosophy ought to emphasize is the nec-

essary connection of biological and psychological considerations with an insight into the problem toward what values the physical and psychic forces of the child shall be directed. We have here the same view that this article has tried to present: that only a permanent clarification of methodological and philosophical principles can help us to develop in the best way the possibilities inherent in the coöperation of psychology and education.

The people of the United States have always shown a remarkable capacity to assist their leaders through periods of crisis and difficulty. Let us hope that this will also be the case with respect to the educational problems that will have to be solved in the future of America.

## BOOK REVIEWS

### CHILD GUIDANCE CLINICS: A QUARTER CENTURY OF DEVELOPMENT.

By George S. Stevenson, M.D., and Geddes Smith. New York: The Commonwealth Fund, 1934. 186 p.

This book is essentially an outgrowth of the twelve years' experience in child-guidance work administered under the auspices of The National Committee for Mental Hygiene and financed by the Commonwealth Fund. It apparently represents the joint viewpoints and philosophies of these two agencies and, therefore, might be considered the *magnum opus* in the child-guidance-clinic field.

In assembling their material, the authors have ignored no pertinent questions, and have discussed many delicate situations and controversial questions with great tact and skill. They have handled a difficult job well, and the book represents a distinct contribution to child guidance.

The first chapter deals briefly with the general considerations of child guidance and serves as an introduction to the questions discussed more fully later. A few charts help one to visualize the growth of the clinics. In 1919 there were seven (only two full-time) while in 1932 there were 232. Twenty-seven full-time clinics now operate in as many cities among the fifty largest in the country.

The three succeeding chapters are grouped under the heading, *The Rise of the Clinics*. They are brief, largely historical, and include discussions of the backgrounds of child guidance and the pioneering and demonstration work. One might mention in passing that the few existing centers of related work with children, in the principal and socially more advanced cities, before the establishment of the child-guidance-clinic program, were evidently an outgrowth of a natural local demand, while the child-guidance clinics had to create this demand through demonstrations. In this respect the child-guidance clinic was a pioneer undertaking and, as in most pioneer work, one finds the trial-and-error method.

The final division of the book, *The Clinics To-day*, is more complete, and it is here that one finds the most important discussion. It is much healthier to elaborate on the present and the future than to dwell too much on the past. The chapters in this division deal with the present clinic pattern, the approach to the case, the selection of cases, clinical services and procedures, the clinic staff, educational and community activities, evaluation and research, and finally trends and possibilities.

It is difficult to criticize the points of view in any of the chapters, since they are all possible within the flexible and highly individual organization set-up in a clinic. The authors reveal no consistent personal attitudes, though their insistence upon psychiatric leadership in group planning is quite definite. Possibly the university-medical-school and hospital-affiliation trend of the child-guidance-clinic movement, noted by the authors, is in keeping with the medical-leadership ideal. In so far as the movement has crystallized, it has kept the need for fundamental medical training for the executive well in the foreground of group thinking and planning.

Psychiatric social workers have, on occasion, been inclined to challenge the psychiatric leadership. Both psychiatric social work and child-guidance-clinic work are of recent origin, both are still highly experimental, and neither has by any means always found its proper place in the general scheme of things. It will be interesting to follow the future trend of the social-work movement toward psychoanalysis, especially in relation to the increased public support necessary in case-work agencies practicing this discipline. The authors aptly remark (p. 166): "Most sound clinical programs are compromises between the professional zeal of the staff and the healthy vigors of the struggle for survival."

The chapters on approach to the case, the selection of cases, services, and procedures are exceptionally fine. The chapter on educational services shows, as a result of experience, that the value of general educational effort expended upon lay groups is sharply limited. The more valuable educational approach is with other professional groups that touch the lives of children closely, especially through coöperative case-work and in training centers for medical students, social workers, and teachers. The problems of clinic affiliations and support are wisely discussed, and the values and disadvantages of university and hospital affiliations clearly indicated. The comments on the criteria for accepting cases are wholesome. In choosing cases the maximum value in educational terms to the community should be kept in mind. The remarks on the difficulties of evaluating success or failure in clinic work, the need that a community be adequately prepared in terms of parallel services, the difficulties of rural work, and the wisdom of making this a state project, are all sound.

The following passage from the last paragraphs of the book indicates the trend of thought and attitude of the authors:

"Clinical service for child guidance gives effect, on a limited scale, to the best current thinking about the way to prevent delinquency and mental disease. While its failure to develop conclusive methods for measuring results makes it impossible to say definitely that it does prevent either delinquency or mental disease, evidence, of a subjective and personal sort, impressive in the mass, indicates that it can and does



relieve specific tensions in children, free them from crippling demands, add to their happiness, smooth their way. . . . The child-guidance clinic is more than a therapeutic agency. It is a tool for synthesizing the most promising approaches to problems of behavior and personality in childhood, and for demonstrating the synthesis to the professions concerned with those problems. It is a laboratory in which new leads may be found for the study of the child. As such it has a place in social evolution."

In conclusion, one might say that this book portrays a specialized effort to understand and help maladjusted children, for the most part in geographically unexplored and unprepared territories. It is an interesting account of rapidly changing affiliations, methods, and techniques, of failures and successes, and of the present status of a movement that has gained great momentum. The authors have no panaceas to offer, no axes to grind. Some questions are answered, but many remain to be solved. The outstanding feature of the book is its objectivity. No tendency is shown to lean toward this or that brand of therapy, and the possible value of all forms of approach is admitted. The insistence on open-mindedness is a healthy one.

The book should attract the attention of a host of people besides those actively working in the child-guidance-clinic field. In make-up it has all of the usual excellent earmarks of the Division of Publications of the Commonwealth Fund.

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CHARACTER EDUCATION IN SOVIET RUSSIA. Edited by William Clark Trow, with a Foreword by George S. Counts. Translated by Paul D. Kalachov. Ann Arbor, Michigan: The Ann Arbor Press, 1934. 196 p.

This little volume renders a real service to American readers, particularly to educators and students of sociology, in that it gives the first brief, but authentic picture of the Young Pioneer Movement in Soviet Russia written without the prime purpose of telling others about the program, but rather directed, so far as the articles by Russians themselves are concerned, to explaining the philosophy and problems of the movement to those who are to participate in it and direct it, in Russia. Thus we may, as Dr. Trow points out in his introductory chapter, be carried "safely through the propaganda barrage to the inner recesses of the cultural revolution."

The book is really not one book at all, but a series of five articles written by adult leaders of Communist youth, for the guidance of those who, as young Communists, are to direct the work of the Young Pioneers. These articles are realistic, critical, yet enthusiastic, as the problems and possibilities of the movement are set forth. The

writers have not been sparing of condemnation of shortcomings in practice, and are apparently honest in their open-minded search, not alone for better administration of the program as it is, but for improvement of the whole scheme. This attitude of self-criticism runs throughout, but is bogged down from time to time by the acceptance of ideologies peculiar to the whole Communist movement. Utopias are no more free from "blind spots" than the common run of human endeavors. So much for the purposes of the writers.

For the American reader, Dr. Trow's excellent Editor's Introduction contains the clearest and least involved statement of the aims and organization of the Young Pioneer Movement, although a somewhat longer and more detailed statement is contained in the translation comprising Chapter III. The Young Pioneers—their full name is The Children's Organization of Young Pioneers of the Name of Vladimir Lenin—constitute Soviet Russia's attempt to indoctrinate its children with the ideas and ideals of the Communist revolution through precept and activity. Frankly admitting that the school is inadequate for this task, and recognizing that everything that the child does and all that he sees about him educates him, the Soviet régime seeks to capitalize this fact—if one may use the word "capitalize" in discussing anything Russian to-day—by organizing the most promising children in each community into an active propaganda and educational force, under the direct leadership of the Young Communist organizations, the Komsomols. The whole organization is entirely separate from any school or other affiliation, although divisions of the Young Pioneers are frequently found within the membership of schools. The ages of the children range from ten to fifteen years, and with the Young Pioneers is associated another organization, the Young Octobrists, ages seven to ten.

Thus one sees the Communist hierarchy, the first Communist shift being the members of the party proper; the second shift, the Komsomols, or Young Communists, ranging from fifteen to twenty-two years; the third shift, the Young Pioneers; and the fourth, the Little Octobrists. When one realizes that the Communists represent a picked group of less than 2 per cent of the Russian population, and that upon this group rests the whole responsibility of government, political as well as industrial, economic, and ethical, one begins to appreciate the zeal with which the youth are sought, as active, promotional units in the scheme for social revolution. In no modern state has there been so deliberate an identification of children with a social scheme as this. Democratic America might well realize that, with all we do for children, we seemingly lack the machinery for such integration of cultural ideals with the zeal and strength of childhood.

The deliberate purposes of the Young Pioneers may be expressed in four oft-repeated expressions, appearing throughout the volume: leadership, self-activity, recreation, and culture. Whether these purposes are fulfilled is a question that only further time can answer.

In reading the book, one is impressed with the similarity of the organization to the Boy Scouts, although Soviet Russia would deny this identification and has repudiated the Boy Scouts as "bourgeois and militaristic," designations that seem amusing, if not mystifying, when one sees that the uniforms, codes, laws, organization, and activities of the Young Pioneers bear a distinct resemblance to those of the Boy Scouts.

One suspects that the children are not so conscious of their place in the scheme of things as their elders believe they should be, in reading the discussion of problems confronting the leaders. Viewed from a distance, the whole program looks artificial, unchildlike, and involved. While the organizers and directors of the program have apparently sought to adapt the teachings of Dr. William Heard Kilpatrick to Russian conditions, the result is disappointing, if one is to believe the evidence of the book itself. In the first place, although the leaders—Young Communists—are again and again urged to see that the children's activities are "self-directed," the whole scheme is such that self-activity, in the sense in which Dr. Kilpatrick means it, is almost impossible, since both the type of activity and the methods of getting it performed must fit the Communist scheme absolutely or suffer condemnation. The zeal with which the ten-to-fifteen-year-old child is expected to hate and suspect non-adherents to the Communistic thesis is altogether incompatible with the notion of free activity of a childish nature. Their shock brigades, for the "inspection" of industry, and their circles for the mature (?) discussion of the principles of economics and government might be more effective in review if one did not realize that all this activity is directed, not by well trained men who thoroughly understand the psychology of personality development in childhood, but by the leaders of the Young Communists who are Komsomols primarily because of their zeal for the Communist creed!

The authors of the articles sense this weakness in the scheme of leadership, but apparently depend upon condemnation and further explanation of what ideals to seek, rather than upon specific case-reference demonstration as to proper methods of approach in dealing with pre-adolescent children. One could wish that these young leaders might be given specific directions, and long, carefully supervised training, before they were allowed to undertake so enormously vital a program. But, so far as that goes, one needn't go to Russia to see evidence of such improper emphasis. Most amateur, and many

professional, programs of character education in America might be similarly criticized. Again and again in the book, when a practice involving bad leadership is cited, and one is all ready to read a statement of policy involving some real understanding of child nature, one reads, instead, a tirade against the wicked Capitalists, and some vague generalities, useless in a concrete situation.

To cite an instance at random, in discussing the selection of link leaders—a link is a group of Young Pioneers within the Pioneer Division, composed of ten children of like interests—instead of indicating how the advisers may assist the children to select wisely, the paragraph ends with the statement that “the children of proletarians, of the poor laborers’ families, possess these very qualities in a higher degree than do any others.” Perhaps this is true in Russia, but in a random sampling of any other population the world over, one will not find nature and nurture so conveniently accommodating in assigning qualities of leadership to the children of any one class.

In common with most other character-education programs based primarily upon the establishment of a static system of ethics, rather than upon an intimate realization of the nature of child personality and development, the program seems extraordinarily involved, highly artificial, and somewhat remote from the probable capacities of children. Like the philosophy of education of a hundred years ago, Russia is apparently seeking to identify childhood with adult life by assuming that children are just little adults—a concept that must be abandoned if one is to begin to understand childhood as a distinct and promising phase of life, valuable for itself and in itself. With their concept, Russia would do well to abandon the idea that free activity is essential and desirable, and proceed directly and realistically to the business of indoctrination, remembering all the time that indoctrination is frequently incompatible with good mental hygiene and optimum child maturation.

The titles of the chapters constituting the translated portion of the book, and descriptive of the contents, are as follows: *The Communist Education of Young Pioneers*; *Principles of Pioneer Organization*; *The Role of the Leader*; *Self-activity and the Pioneer Actif*; and *Work With the Children's Actif*. They are frankly work sheets, written for home consumption, critical, realistic, and hortatory. There is not much room left for argument. The program is an imposed program, with all its protestations of freedom! Utopias are not liberal, and perhaps one should not be disappointed to find this one illiberal. Certainly, as a result of the activities of the Young Pioneers, Russian Youth so influenced will, if the job is thoroughly and critically done, be confirmed Communists, emotionally conditioned to accept without much argument the fundamental theses of Commu-

nism. Perhaps this is the way to develop personality and character, but mental-hygienists will, it is feared, wonder again and again what is happening in the inner mental life of Young Pioneers, so ruthlessly burdened with feverish activities imposed at all points by adult ideologies, whose zeals derive from hate and suspicion quite as frequently as from Utopian idealism.

One cannot ignore this program, one can certainly wish it well, and one must determine at the outset to criticize the plan itself, rather than the underlying social revolution that gives it life—if indeed one can make that separation. A program that can give direction and point to the destinies of 200,000,000 human beings is a mighty program, whatever its merits in the eyes of democratic liberals. Must character be imposed? That is the question!

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SOCIAL DEVELOPMENT IN YOUNG CHILDREN; A STUDY OF BEGINNINGS.

By Susan Isaacs. New York: Harcourt, Brace, and Company, 1933. 480 p.

This is a companion volume to the author's *Intellectual Growth in Young Children* and, as Mrs. Isaacs points out, it presents an arbitrary separation of emotional from intellectual data merely for convenience in handling the material. The two taken together comprise a contribution of observations and theoretical discussions indispensable to persons sincerely interested in young children. Mrs. Isaacs, acknowledging her debt to Freud, Joan Rivière, and Melanie Klein, has used her understanding and skill in a memorable manner. The material falls naturally into three divisions: presentation, first, of the observed psychological data; then of the theoretical concepts that explain them; and, lastly, of the relations that education bears to psychoanalysis and the problems of social development.

Although the book lends itself easily to detailed discussion, it may be more feasible to consider it on its broadest bases and leave to the reader a more minute study of the material. Let it be understood at once that the book is written for the scientific public, primarily for psychologists, secondarily for educators. It is based on honest clinical observation fortified by theoretical study and training in child analysis. One of its greatest values is that the studies are of total behavior in a given, though limited environment (Malting House School); there is no artificial isolation of symptoms-as-ends-in-themselves. So much of our literature consists of academic studies of "habits" that we cannot state too strongly the need to see deeply into observable behavior in order to understand and control it.

The fallacies that have guided us—that still do guide us—in much



of our advice to parents are here exposed to the daylight. In our efforts to wean and train the child at an early age, we have frequently deprived him of sufficient satisfaction to insure normal development. In our misconception of repressions and suppressions, we have unwittingly increased his guilt and anxiety by not helping him to self-control. In fact, the early growth and significance of his super-ego have not been properly understood, and the actual need of the child for guidance has often been ignored. The opposition to much of so-called progressive education may well be based on sound common sense, an intuitive awareness that absence of discipline can be acutely harmful and painful.

Behavior that in itself is unpleasant and impossible in an ordered society is not always recognized as the expression of intense anxiety and guilt, but is treated instead symptomatically until it disappears only to give rise to less easily observable, but equally undesirable activity. Specifically, Mrs. Isaac's explanations of tantrums, feeding and toilet problems, masturbation, and the like ought materially to change our treatment of them.

There can be little doubt but that our tendency to look askance at the natural aggression, hostilities, and ambivalence of the very young child is due in part to our unconscious guilt. On the other hand, we are surely becoming more able to tolerate the knowledge that young children have such feelings and must to a certain reasonable extent be allowed to express them. The theoretical and practical discussion of the subject which Mrs. Isaacs has given us will help to end our confused thinking about morality in so far as we can bear to change our standards of behavior.

I should like to call special attention to the pages in Part II—*The Educational Problem*—which Mrs. Isaacs devotes to a differentiation between the processes of education and psychoanalysis. The rôles that the analyst and the teacher play in the life of the child must not be fused or confused. In an era when more and more people are becoming acquainted, sometimes quite superficially, with analytic concepts of behavior, the rôle of the therapist may be assumed without a full recognition of its responsibilities and dangers. It is an age when all those working in the social arena feel an acute obligation toward their fellow beings. It is one thing, however, to know that the unconscious exists and something of what it consists, and another to handle its content. Mrs. Isaacs explains this far better when she says: "The serious risk when any person, with an active real relation to the child, makes attempts to get below the surface of the child's mind in the pursuit of his ordinary relations is that it is really impossible to know what the effect may be, what immense conflicts he may be stimulating, and what immense charges

of feeling, positive and negative, he may be drawing to his own person, without ever being able to disperse these again by tracing them to their sources in the real experiences of infancy."

Mrs. Isaacs has given us a picture of children in relation to one another, and in relation to adults outside the family circle. When she is in possession of the facts, her data are illuminated also by the child's experiences at home. The result is something that is "all of a piece," a coherent, though intricate pattern. It is not complete because, as the author points out, school experience is only a part of the child's life and, in addition, the primary function of a school necessarily limits the child's opportunities for self-expression, in as much as he must observe the rights and privileges of others.

Within these limits, however, the book is utterly convincing and a valuable addition to our very meager clinical studies of young children.

JEANETTE REGENSBURG.

*Charity Organization Society, New York City.*

CHILDREN AND PURITANISM; THE PLACE OF CHILDREN IN THE LIFE AND THOUGHT OF THE NEW ENGLAND CHURCHES. By Sandford Fleming. (Yale Studies in Religious Education.) New Haven: Yale University Press, 1933. 236 p.

There has been much interest in recent years in the causes of social maladjustment. Was there a time in the individual's early life when the onset of the mental or emotional difficulty could have been checked or prevented? What are the influences in early or late childhood that tend to—or almost certainly will—produce maladjustment? Much emphasis has been put on early emotional disturbances and the need for two definite precautions has been stressed: First, security and serenity in childhood must be preserved if it is at all possible; second, parents and guardians should understand how to avoid forcing a child emotionally or socially. Certain social stimuli are helpful at the appropriate stage of development, but harmful at an earlier period.

In the light of these interests and concerns, we read this study with increasing astonishment. We are prepared for the fact that there was the same disapproving fear for the futures of misbehaving young people that there has been since, and was before. In the year 1657, one worried minister writes to another:

"I find greatest trouble and grief about the rising generation. Young people . . . strengthen one another in evil . . . I tremble to think what will become of this glorious work that we have begun, when the ancients shall be gathered unto their fathers. I fear grace and blessing will die with them."

But we are not prepared for the way in which children responded to the appeal that was made as a result of this fear that religion was dying out, or for the phrases in which they stated their desire for "salvation."

The study concerns the history of Congregational churches in New England from their founding up to the time of Horace Bushnell, and asks the particular question how children were regarded by their Puritan parents and their spiritual guides. In the year in which the letter quoted above was written, things looked dark indeed for the religious life of the Puritans; the great impetus to leave their homes and seek a place to worship in a new country seemed to have worked itself out in the energy that was required to meet the hardships of a pioneer life, and late in the seventeenth century the "decay of godliness" increased. As Increase Mather expressed it, "Things look at this day with a dark and dismal face." Then, about 1734, came Jonathan Edwards, with his power to stir the emotions and bring about a conviction of sin, and revival followed revival. It is the part played by children, some as young as six or seven, that most interests us as we survey the study from a mental-hygiene point of view. How about security and serenity and the unfortunate results of an emotional forcing?

In the chapters entitled *Uniting with the Church* and *Excessive Emotionalism*, we are told of the means used by the great preachers and revivalists of that time to bring about conviction of sin and surrender of the soul to God. As we read the words of Edwards and other divines, we are oppressed by the terror and self-depreciation that they are meant to inspire and wonder at the endurance of their congregations. But when we are told that these same expressions are used with children, it does not seem possible that a healthy maturity could have followed such experiences. Children were regarded as of mature years when fourteen or fifteen years old, and the same responses as those of conscience-stricken adults were looked for from children as young as six. The author says: "The inevitable result in the case of children must have been a heart-rending experience of fear, and in the case of many of them, a sense of rebellion against the God who demanded such things." There are many quotations of prayers and confessions of young children which appall us by their unchildlike emotionalism. One quotation I must make from a book by Cotton Mather, published in 1711, *Memorials of Early Piety Occurring in the Holy Life and Joyful Death of Mrs. Jerusha Oliver*. This was a book for children, and in it we read that she wrote, "while her infancy was hardly yet expired": "I have been guilty of one Sin, which is greater than all these, That is Unbelief. And besides all this there is that Sin of Sins, my Original Sin; my Nature is Sinful."

"The 'Fast of the Closet' became a habit of her life when she was about thirteen years of age."

Phrases that we now associate with unhealthy introspection and a weakly emotional religion are found on the lips of young boys and girls, such as, "Oh, what a sinner I am! Oh, what a fit object of divine wrath!" Religious education was concerned chiefly with arousing in children's minds a consciousness of unforgivable sin which could be expiated only through the gracious love of a just, but merciful God, and teaching them with rigor the most abstract truths of a formal and complicated theology.

Then what does it mean that New England has stood for so long as the source of sturdy pioneering leaders? Many parts of the Middle and Far West have been settled and organized by the descendants of the children who were exposed to these overwhelming emotional experiences and to a type of education that now seems cruel. Are children more proof than we sometimes realize against shocks that shake and bewilder adults? In the midst of these unreal terrors, there always surrounded them the deep concern and often the heartily expressed admiration of the parents and the pastors who were stimulating these precocious words and deeds. Did this affection—for such it surely was—and a sort of recognition that must at times have been deeply satisfying offset the misjudged stimulation? And was the emotional outburst so far beyond their real comprehension that it left no scar? It may be that New England is richer in neuroses than other parts of the world and that the main reason is to be found in the "Great Awakening" of the early eighteenth century; or it may be that sources of strength were embedded in this strange kind of religious education and that constructive elements in the somewhat contradictory New England character issued from it.

ELEANOR HOPE JOHNSON.

*Hartford School of Religious Education.*

BOY AND GIRL TRAMPS OF AMERICA. By Thomas Minehan. New York: Farrar and Rinehart, 1934. 246 p.

"An artist—not a scientist—was needed to paint what I had seen, record what I had heard. And I was not even an amateur craftsman. Yet for the sake of the homeless thousands of boys and girls, I decided to try."

Thus is introduced a sympathetically drawn picture of the life and habits, the conversation, the goals, and the cultural pattern of the half-million of transient children in this country. A reader who begins the book will finish it. It is too full of life-as-it-is, it has too well caught the insolubles, to allow one to wander from it. Especially should those who cling close to the well-rounded case history be

touched by the inextricable mass of contradictions that characterize this picture.

In rapid succession come descriptions of how these children travel, get food and clothing, where they sleep, their sexual and religious life, their political and social philosophy, their new education, their own new cultural pattern—descriptions at the hand of one who for two years lived as a transient and, be it said, at the hand of a well-skilled craftsman. It is all a story of how the child reacts in the face of crisis, full of pathetic futility and happy triumph. One who knows children anywhere and under any conditions will see his own cases and their problems in these chapters.

Which seems to the reviewer to mean that the author—perhaps not quite knowing that he was doing so—has quite overshot his particular goal to give a picture of all of the life of all children. He assures us that the volume is based on long and frequent records; that, written as an artist's production, it has the accuracy of actual situations back of it. This he need not have done. The narrative rings too true to late adolescence under any social conditions to be other than an accurate assay of the boy and girl tramp.

So much for the virtues of a highly readable and compelling picture of the sorry plight of these vagrants. Its faults—well, there aren't any unless one excepts the title. For this is a book about children rather than tramps. Their conversation lacks some of the outstanding topics usual in children's discussions (notably sports) and their sex life is a crude, outspoken, brusque destruction of the tentative shyness that is the picture in the stay-at-home. But beyond this one closes the book with the feeling that he knows nothing of the tramp as such. Perhaps there isn't any "tramp as such." Certainly the table as to family status indicates that these children stayed at home apparently until long after every resource had given out there. Nor do they talk of home or family—again indicating that they are not far from these ties, were there only some way they could be satisfied.

Once in a long while an author thinks that he is writing about a child when he is really writing about children, thinks that he has a live topic when he really has taken the topic of life. This is the "fault" of the book under review. And because of this error, more than for any other reason, we recommend that a great many people read it.

JAMES S. PLANT.

*Essex County Juvenile Clinic, Newark, New Jersey.*



660 RUNAWAY BOYS. By Clairette P. Armstrong. Boston: The Gorham Press, 1933. 208 p.

This book, while it is carefully written, is bound to be disappointing to many who will for various reasons be intrigued by its title. Those who read it hoping to find some common denominator in these boys, on which a beginning of the solution of the problem of runaway boys in general might be based, will be disappointed. However, the statistics that occupy most of the book do present some interesting factors. Both the statistician and the mental-hygienist will be dissatisfied with these factors as a helpful explanation of the problem—the statistician because of the absence of a control group of boys who did not run away despite a similar environment, and the mental-hygienist because of the absence of a control group whose psychological reasons for not running away are known.

The author approaches the problem and his work honestly, feeling that a study of the obvious environment, the mental level of the children, the age, or the sibling relationship will not answer any of the important questions as to why this child runs away and that one does not—questions that the judge and the guidance clinic wish very much to have answered. No thorough investigation of the individual life of these 660 boys is recorded in the book. The author suggests that this might add much to the value of the study.

The book, reporting as it does on a rather large piece of statistical research carefully carried out and presented in an interesting and readable way, will be of interest largely to the social statistician. But it and other reports of the same kind do serve also the purpose of showing the social worker, the probation officer, and the clinician that investigations and measures of social treatment carried on at the level of knowledge about the problem child on which this study is made furnish considerable information that will help in the solving of the runaway child's problems.

Could a true longitudinal history of the child's emotional experiences, paralleling his environmental experiences, have been presented, such a study might establish some general principles as to why boys run away, whether it is harmful for them to run away, and what to do to prevent it.

S. W. HARTWELL.

*The Worcester (Massachusetts) Child Guidance Clinic.*

EDUCATION AND EMERGENT MAN. By William C. Bagley. New York: Thomas Nelson and Sons, 1934. 238 p.

This first volume in the Nelson Education Series (edited by Professor I. L. Kandel, of Teachers College, Columbia University) is a plea for the long view of education as one of the four funda-

mental agencies of social progress. Dr. Bagley does not embrace the easy error of those teachers who seem to assume that the chief, if not the only, instrument of progress is the school. He gives due place to discovery, creative productivity in the arts and sciences, and that evolution of folkways which the schools may not be able, in any one age, to speed up any too noticeably. At the same time, however, he rejects the fatalistic determinism which accords to education only a slight importance, if any at all. He, therefore, invites us to take the extended view which begins with the emergence of *homo sapiens*, which notes where man has risen no less than where he has fallen or stood still, and which then aims to improve and enrich the most significant gains the human race has already achieved. His faith in at least a fighting chance for progress moves him at times to paragraphs of marked eloquence.

The book is of interest to more than teachers. One of the aims of the author is to bring together teachers, sociologists, parents, psychologists, philosophers. He is all for the new configurations that result from interrelating these varied approaches. The chapters of special interest to students of mental hygiene are those, for example, which criticize the view that because some persons are "born long" and others short, mentally as well as physically, the odds are all against the efforts of educators. How can we tell until we try? While biological differences among racial and national groups exist, the outstanding differences can be traced less to heredity than to differences in culture. An excellent warning is sounded against repeating the uncritical acceptance of the intelligence-testing procedure of the decade immediately following the World War. Students of educational psychology are reminded also how the belief that training must always be highly specific and that there can be no transfer of results received its vogue, in part, from the growing popularity of a mechanistic psychology. To-day the outlook is somewhat less dogmatic. All in all, it is encouraging to find a scholar as ably trained as this veteran, not only in the social sciences, but in the practical difficulties of school administration, pleading as he does that an informed faith in education is worth all the labors that it exacts.

HENRY NEUMANN.

*Brooklyn Society for Ethical Culture.*

SUCCESS AND FAILURE IN THE TEACHING PROFESSION. By Gladys H. Watson. New York: Teachers College, Columbia University, 1932. 99 p.

The study presented here was made for a doctor's thesis at Columbia University. It involved an exhaustive examination of data for a

considerable number of tests and questionnaires administered to 58 present or prospective teachers who had been connected with Teachers College. On the basis of ratings by professors as to probable success, two groups, of 39 and 19 respectively, were selected at the extremes of ability. They were given a considerable range of tests and personality schedules by mail, supplemented in some cases by personal interviews. Tests that lent themselves to quantitative treatment were correlated with the criterion, using bi-serial  $r$ . Item analysis was pursued for the remainder and all cases with at least a 20 per cent difference in the proportions of the two groups marking an item were noted. Individual case studies were compiled, and six educational psychologists rated the individuals on the basis of these case reports for comparison with the judgment of the department that made the original selection of the two groups.

The data are analyzed in great detail. The most differential quantitative items appear to be college marks and a general intelligence test. Perhaps the more interesting results are in the qualitative analysis. For instance, the successful teaching group seemed to have a more objective adult attitude toward their parents and less general conservatism. This matter of early attitudes in the home as related to subsequent vocational success seems to the reviewer a point that deserves further investigation. He knows a case in which somewhat the same approach to problems of supervision in industry seems to be yielding interesting results. In contrast with the present case, however, the data were obtained in a very carefully controlled clinical interview rather than by mail. When the six educational psychologists rated the individuals on the basis of the compiled case studies, frequent disagreement with the original ratings were noted, and explanations are attempted by the writer.

It would not be difficult to make rather damaging criticisms of the monograph. The procedure of sending the blanks to the individuals instead of administering them personally is, of course, open to some question. The author states that in some cases interviews were given and misunderstandings in the blank were discovered. However, in many cases interviews were not available for this purpose. Then there is the factor of selection in the groups, in as much as they all came from one institution. The groups involved both sexes, whereas male norms were used in evaluating the Strong vocational-interest blank. Few of the items in the detailed analysis were of very much statistical significance. However, the author is aware of all these limitations and qualifies the results appropriately. The net result is a few worth-while "hunches" for further study.

The reviewer's additional suggestion would be that objective personality measurements be developed and where that is not feasible,

that the scales be administered personally and supplemented with a great deal in the way of a clinical interview.

HAROLD E. BURTT.

*Ohio State University.*

OUTLINE OF CLINICAL PSYCHOANALYSIS. By Otto Fenichel, M.D.

Translated by Bertram D. Lewin, M.D. and Gregory Zilboorg, M.D. New York: W. W. Norton and Company, 1934. 492 p.

This book is exactly what the title implies—*i.e.*, a presentation of the clinical data collected by psychoanalysis over a period of forty years, together with the theoretical formulations that have been established to organize this material into useful and comprehensible form.

The account is strictly orthodox in that it emphasizes only that part of the work of Freud and his collaborators which is uniformly accepted in official psychoanalytic circles. The more speculative considerations are avoided, and the author is in high degree impersonal and steers clear of special pleading for any of the various currents in present-day psychoanalytic thought. Therapeutic technicalities and psychoanalytic methodology in general receive only minor consideration. In substance, this is a work on psychoanalytic psychopathology.

The book is heavily documented, with references on almost every page. Ten chapters cover the field of mental pathology of the so-called functional type in accordance with accepted psychoanalytic nomenclature. The headings are as follows: *Hysteria; Anxiety Hysteria; Hysteriform Conditions; Compulsion Neurosis; Pre genital Conversion Neuroses; The Sexual Perversions; Neuroses Related to Perversion; The Schizophrenias; The Manic-Depressive Group; and Character Disorders.*

Dr. Fenichel has been an outstanding figure at the Berlin Psychoanalytic Institute. He is unusually well fitted to prepare this special work in that he combines the skill of the practical clinician with that type of encyclopedic mind which enables him to keep in objective relationship to the vast body of psychoanalytic literature. His writing is notable for fairness and moderation, and he is conservative with reference to the limitations of present-day psychoanalytic knowledge and the scope of psychoanalytic therapy. The following quotation (p. 133) concerning the relationship of psychiatry and analysis shows that the author, in his concentration on the latter, does not lose his general orientation:

"The relations of psychiatry and psychoanalysis have been discussed so frequently and so adequately that they need not detain us here. Suffice it to say that a psychoanalytical theory of psychoses by

no means implies that psychiatric research is superfluous. The aim of such an analytic theory is only to supplement psychiatric knowledge at certain essential points. Regardless of such a theory, there remains the field of somatic problems, which cannot be attacked by psychoanalysis, and on the psychological side, the purely descriptive studies. Moreover, the 'microscopy' of psychoanalysis *presupposes* the existence of the 'macroscopy' of psychiatry as histology presupposes the existence of anatomy. This macroscopic study is clinical psychiatry, which deals with symptomatology, diagnosis of the clinical picture, and prognosis. These psychoanalysis must take for granted."

The assumption that some unknown physical pathology probably underlies abnormal mental functioning is implied in much of this discussion. The central framework of psychoanalytic theory is concerned with the various levels of the libido organization, and where developmental influences fail to explain libido vicissitudes, the author finds recourse in the postulation of some undefined constitutional factor in the psychobiological realm.

This book is not for beginners, as its goal has been systemization and completeness, rather than clarity or simple generalization at elementary levels. Also, case material is used sparingly and only to illustrate very special points. For students in clinical analysis and for practicing analysts, it is a whole library in one volume, and should take first place both as an established text and as a reference work in the field of psychoanalytic psychopathology of the special neuroses.

MARTIN W. PECK.

*Boston.*

FACTS AND THEORIES OF PSYCHOANALYSIS. By Ives Hendrick, M.D.  
New York: A. A. Knopf, 1934. 308 p.

One of the curious sociological phenomena of the times is that those who have recently been through some kind of tremendous or novel emotional experience wish to write a book about it. New-comers in the psychoanalytic world are not free from this very human trait. In due time, no doubt, this phenomenon will receive treatment in a learned monograph. In the meantime we others are the better by two or three excellent short accounts of the Freudian doctrines. The book under consideration presents a very clear and well-written account, the best epitome now extant, of what is generally accepted as fact in the psychoanalytic description of the human constitution. With this goes a brief semi-historical survey of the theories advanced to rationalize these facts, and a final section devoted to an attempt to fit psychoanalysis into the perspective of the times.

Since the book is apparently aimed at laymen, who quite properly



are believed not to be interested in the complexities of the construction of theories, a glossing over of the highly unsatisfactory state of the present instinct theory is justified. Nevertheless, this book is only one more that serves to hide the fact that in this theory a metaphysical abstraction, the death instinct—or, at least, something of a very different order of being from the biological standpoint—is placed on a level with a fairly well-grounded biological conception, the libido. Nor is stress laid on the fact that the inadequacy of this theory grows out of theoretical and technical inability to deal with the central problem of psychotherapy, the problem of fear and guilt.

As the greater part of the book, being a summary of the generally accepted views of the psychoanalysts, makes no pretense to originality, we will pass on to the final section, which presents some novelties. Here there is a discussion of the current practices of psychoanalytic education and of the application of half-understood psychoanalytic principles by psychiatrists and social workers.

The question is not discussed, but is raised—in the mind of the reviewer at least—as to just what purpose is served by writing such books for the “intelligent layman.” Partly, no doubt, every psychoanalyst feels impelled to combat the reams of nonsense written as “introductions to” and “brief surveys of” psychoanalysis by the popularizers and non-experts. On the other hand, the implication seems to be that psychoanalysis is more than a therapy of isolated individuals by particular physicians, that it has some sort of social function. It is not consistent with what seem to be the settled analytic views of psychopathy and the technique for dealing with it that this collective function should be thought of as broadly therapeutic by way of education of the general public. Indeed it can be maintained, with what cogency remains to be seen, that this practice is directly anti-analytic. It is still current practice, I believe, for analysts to forbid the reading of books of this kind by their patients until after the analysis, the usual rationalization being that such reading serves to reinforce the “resistances.” Why, then, is an exception made for the general public? It has been pointed out—notably by Rank in his book on education—that such practice serves to sharpen the sexual conflicts, ideological if not actual, inherent in our present social system, since a real education can be realized only in actual practice and not in empty verbalizations. Such a realization in the sexual sphere is to-day obviously out of the question.

There is a tendency among untrained analysts to practice therapy by terminology. This is a thoroughly discredited technique in the analysis of individuals. Even the patients see through it. But on

the collective level, insufficient recognition is given by analysts and others to the fact that this same technique is practiced. The moralizing proclivities of the layman are bound to seize upon any weapon for the practice of new tyrannies on their children and neighbors. A current practice closely associated with this is the tendency to accelerate the very prematurity of instinctual development that at present seems to be one of the roots of psychopathy. Our ignorance here is so great that pains must be taken not to draw up or to permit the drawing up of moral codes based on the supposed teachings of psychoanalysis. It must be said that Dr. Hendrick has attempted to guard against such misuse of his book, in so far as it is possible to do so, by pointing out clearly the distinction between strict analysis and its possible derivative applications.

Against all this must be balanced the consideration that perhaps only the necessity of combating the uses made by the general public and by patients of psychoanalytic theories can do away with the present tendency to attribute undesiscriminatingly to "resistance" any healthily skeptical attitude toward incompletely established and worked out theories. In part this tendency rests on a confusion between the analyst in his therapeutic rôle and the same man, somatically speaking, in his very different capacity as theoretician.

The least successful part of the book is the section devoted to an evaluation of the other "schools," it being, as is to be expected, the least informed section. No mention is made of the fact that many of Adler's "superficialities" were, nevertheless, based on an early acceptance of the aggressive drive as a fundamental factor in the human make-up. Remarks by him as early as 1908 sound strangely like current Freudian formulations. The long section devoted to Rank is, it is not too much to say, a complete historical and theoretical misrepresentation. Rank has written many things, but I know of no single instance in which he used the word "will-power." The concept of "will" as used by him is something very different from the layman's "will-power," derived as the latter is from the infantile belief in the omnipotence of will. It is much too early to begin working up legends.

GEORGE B. WILBUR.

*South Dennis, Massachusetts.*

SOCIAL PATHOLOGY IN CHINA; A SOURCE BOOK FOR THE STUDY OF PROBLEMS OF LIVELIHOOD, HEALTH, AND THE FAMILY. By Herbert Day Lamson. Shanghai, China: The Commercial Press, 1934. 607 p.

This book, whose author is associate professor of sociology at the University of Shanghai and which contains a foreword by Herman

C. E. Liu, president of the university, represents a revision and condensation of mimeographed lectures which had been used by the author in actual classwork teaching, and is the culmination of some six years of experience in the teaching field. The ultimate object of the book is to aid in the reconstruction of certain phases of China's life, while the primary object, according to the author, is to furnish college students in China a source book for the study of fundamental social problems involving livelihood, health, and the family as they exist in China to-day.

In presenting this material, the author points out the paucity of complete objective data as it relates to China's social problems, since conditions and customs vary so widely in different parts of that country. In many instances, primary sources of information are limited to one or two investigations by one or more writers, for a small section of China. Despite the paucity of objective data, the author takes the position that the time is propitious to begin some systematic arrangement of the available material now widely scattered in various publications. The book, therefore, may be regarded as a compilation of existing data in the field of social pathology, with special reference to China's problems. The book is designed to vitalize teaching and to serve as an agency for discovering hitherto undiscovered facts about social conditions.

The text is replete with references, but these are limited almost exclusively to those in the English language, including many from the United States, Great Britain, and China. As in all first editions, many examples are quoted from the literature to illustrate the seriousness of various problems in social pathology upon which erroneous conclusions might be made by the uninitiated. On the whole, however, the text is a valuable source book for students, not only in China, but in the United States. In many instances it is very elementary, but that is evidently intentional on the part of the author.

The book does not cover all the possible problems of social pathology found in China. Attention has been centered around three dominant interests—economics, mating, and health—and around some of the institutions and public policies that have evolved to aid and regulate these interests. Poverty, a low standard of living, the labor of women and children, and the conditions under which these men, women, and children work and live are inimical to mental and bodily health and tend to weaken both individual and racial vigor. These matters are discussed in relation to rural and urban dwellers and also in relation to excessive population and illiteracy. Considerable space has been devoted to the problems of health of the people, since disease stands as a prominent factor in the misery and maladjustment of Chinese society. There are con-

ditions in the environment, habits, and beliefs of the people which prolong disease and increase its incidence. Poverty, ignorance, excessive population, and disease are related in a series of vicious circles that constitute a social pathology.

The remedy for these social-pathological situations is, according to the author, improvement of individual character; the development of an informed public opinion; the enlargement of loyalties and the fostering of public spirit; adequate legislation and general education; the reconstruction of institutional environments in harmony with social ideals; and the training of a sufficient personnel to lead social education in furnishing new vision and guidance, in reconstructing the old and lagging institutions, in initiating and directing social improvements, and in framing social legislation.

W. L. TREADWAY.

*United States Public Health Service.*

ALCOHOL: ITS EFFECTS ON MAN. By Haven Emerson, M.D. New York: D. Appleton-Century Company, 1934. 114 p.

In the preface of this book, the author calls attention to the unanimity of opinion expressed on the subject of alcohol by physiologists, immunologists, clinicians, psychologists, psychiatrists, and medical statisticians, and the irreconcilable opinions that emanate from other sources. He informs us that all but two (Arizona and Wyoming) of the states require the teaching of the effects of alcohol upon the human system in schools supported wholly or in part by public funds, and that the book was written to provide teachers and students with the facts as they are now known to medicine and the associated sciences.

The book is a condensation of material from twelve well-selected scientific publications which are listed in the last chapter and briefly described as to contents. These publications cover the entire field of the effects of alcohol, and the author has succeeded very well in presenting the essential features of them in an easily readable form divested of technical details. Among the important subjects discussed are acute and chronic alcoholic poisoning; susceptibility and tolerance; the value of alcohol as a food and a drug; its effect on the various organs of the body and on the special senses; and the relation of its beverage use to the span of life, to mental disease, and to social, economic, and industrial conditions.

The permissible use of alcohol as a beverage is set forth in a chapter which ends with quotations from Plato and Galen, indicating that these two scientists suspected what later studies have shown—namely, that the depressing effects of alcohol on the functions of the brain, by releasing inhibitions, make for ease and pleasure as well as for the

social lapses and inefficiency in persons under the influence of the drug.

This book is well adapted to the purpose for which it was intended. We also recommend it to physicians who would like to read a brief, impartial summary on the effects of alcohol.

LAWRENCE KOLB.

*United States Public Health Service.*

DEMENTIA PRAECOX; A PSYCHOLOGICAL STUDY. By Harriet Babcock. New York: The Science Press Printing Company, 1933. 167 p.

The writer of this book attempts to study patients who have been diagnosed as dementia praecox by means of the quantitative methods of psychology, more particularly those of mental testing. From this point of view an excellent piece of work is done. The purpose of the tests was to measure the amount of mental deterioration of the individual, and in doing so use was made of the law that the oldest learning is the last to be lost. Because of the fact that words are among the earliest learning, performance on a well-standardized vocabulary test is taken as measure of possible level of each subject's intellectual ability. His intellectual efficiency—that is, his ability to utilize his capacities—is measured against this yardstick by means of a series of some twenty tests, each of which was standardized against normal subjects of various mental ages according to the vocabulary scale. The efficiency of a patient is then expressed in terms of the number of years that he is retarded as compared with his performance in the vocabulary test, due regard being given to the limits of normal variability.

In spite of the convincing argumentation with which the work abounds, a definite bias must be noted. The author's attitude is essentially intellectualistic. She argues throughout for an interpretation of dementia praecox in terms of enfeeblement of learning and association—that is, of ability to utilize intelligence—and assumes that this must rest upon organic changes in the brain which are still to be discovered. The organic bias is almost as apparent as is the intellectualistic. Side by side with this goes a marked opposition to any of the psychogenic interpretations of the disease which are now current in psychopathology and an unwillingness to see emotional factors. The critique of modern psychopathology in the introductory parts of the book is excellent. It could be read with great profit by all who are in the habit of explaining mental disease purely in emotional terms.

Yet the reader can hardly fail to see that the writer closes her eyes to emotional factors just as thoroughly as do those she criticizes to intellectual and organic considerations. She uses tests of intelli-



gence and motor capacities as her instruments of research. Nothing in her procedure can possibly show emotional deterioration, emotional blocking, or other mechanisms. Naturally, the results are a function of the method used. Only deterioration in association, perception, ideation, learning, and the like are found. It is then argued that these are sufficient to explain all the pathological phenomena and that nowhere can any of the so-called "psychogenic" factors be seen. Of course not! Nowhere in the procedure used was there any chance of finding them. It is rather a shame that the excellent material on the abilities of patients should be vitiated by an attempt to make the results an exclusive explanation of the disease.

While there are frequent criticisms of other explanatory concepts, the author seems to fail to realize the unstable and subjective nature of certain of her own deductions and explanations. Perhaps the most obvious are certain analyses of tests used. For example, the substitution test is said to involve speed of perception, comprehension of the problem, memory of the symbols, ability to make motor responses, and clearness in keeping the problem in mind (p. 32). Perhaps it does, but without proof that these factors, and only these, are involved, deductions linking poor performance in the test to lack of one of these postulated abilities cannot stand the test of rigorous scrutiny. Psychologists have far too frequently (as H. M. Johnson has pointed out) fallen into the fallacy of equating test performance with ability in a trait which they hope the test measures. No test can be considered to be a measurement of a given characteristic without adequate proof thereof.

In developing her concept of dementia praecox, Mrs. Babcock shows that there is in this disease an inability to fixate and recall new data. This type of memory defect is shown by three tests: substitution, retention of a paragraph, and learning of paired associations. The differences in performance between normal subjects and patients are so great as to dispel any possibility that they might be chance variations. Studies of their school histories show that most of the patients showed impairment at so early an age that it interfered with their school achievement. Frequently the enfeeblement is unrecognized in the first stages of the disease because it seems to be within the range of normality. The course of mental deterioration decreases associative activity and lowers ability to learn. Patients fail to respond to external stimuli because they lack the associations necessary for perceptions, and not because (so far as the author can find) of any emotional blocking. By the time a chronic stage is reached, learning is too far below normal to permit of any possible compensation. Still later, the associative process becomes so dilapidated that the examining situation cannot be comprehended and the patient accepts what-

ever is before him in childlike simplicity. Eventually a stage is reached in which not even old learning can be recalled.

The differentiation between the types of dementia praecox by means of the methods used is enlightening. All show early impairment in mental efficiency. Paranoid and hebephrenic patients are weak in fixation and duration of after-images. The simple praecox is weak in his associations, and the catatonic in the motor phase of response. The hebephrenic's weakness in fixation is considered to be the cause of his "dissociation." It is this type that shows the earliest and most marked intellectual enfeeblement, which is why it has the poorest prognosis.

Taken as a whole, the book is a marked contribution to our knowledge of what is usually considered a most baffling disease. The use of a standardized, scientific procedure is refreshing in dealing with a subject that has been handled with so much pseudo-scientific conjecture. The factual material presented is excellent and illuminating. If some of the conclusions reached seem far-fetched because of the marked bias that we have mentioned, the intelligent reader can readily pass over them in view of the worth-while material that the book offers.

GILBERT J. RICH.

*Milwaukee County Mental Hygiene Clinic, Milwaukee, Wisconsin.*

THE NATURE AND TREATMENT OF AMENTIA; PSYCHOANALYSIS AND MENTAL ARREST IN RELATION TO THE SCIENCE OF INTELLIGENCE.

By L. Pierce Clark, M.D., with a Foreword by Ernest Jones, M.D.  
Baltimore: William Wood and Company, 1933. 306 p.

This book is an attempt to apply psychoanalytic concepts to the understanding and treatment of the feeble-minded. The author does not deny the organic or constitutional causes of arrested mental development, but he feels that psychoanalysis gives a deeper understanding of how the individual is unable to adjust to life in a normal fashion and also affords a method of retraining and reeducating the feeble-minded.

The book starts out with an eighteen-page summary of psychoanalytic principles. In so far as it is possible to state these principles in such a brief space, the author has done so. After this he brings up the various states of mental arrest, starting with the more serious types and giving detailed accounts of cases to illustrate his theories.

Aments are divided by the author into four groups: idiots, imbeciles, feeble-minded, and morons. This method of formulation is not in accord with the classification accepted by American psychiatrists. The author devotes several pages to a discussion of the nature of intelligence without seeming to add anything new to the

subject. In discussing "the process of learning," he makes many formulations that may be accepted by orthodox psychoanalysts, but that have not received general acceptance elsewhere. He follows Freud's latest views of the life instincts and the death instincts and seeks to explain learning on the basis of such traits as oral aggression, identification, and the development of a normal ego.

He feels that amentia is to be explained by a specific type of ego defect, together with an inability to form identifications. As a result, there exists a type of primary narcissism which explains the inability to develop intelligence and to deal with the outside world. The case histories form interesting reading, and whether one accepts the conclusions or not, one has the feeling that these patients have been studied carefully and intensively.

Certain parts of the material are not new, but emphasize what has been recognized by all students of this problem. For example, when we are told that the score by the standard intelligence test must not be taken too literally, and that it does not do justice to the individual's abilities and disabilities, we are getting nothing more than what has been standard doctrine for many years.

On the other hand, the author attempts to put this in psychoanalytic terminology and assumes that in many of these cases there exists a neurosis which prevents the individual from developing many of his latent potentialities: "In other words, our hope would be to free the ament from his emotional difficulties, so that energy could flow more freely into the grasping and adapting to reality which constitutes mental development."

It is perhaps of some interest that in all the cases quoted there is no family history of feeble-mindedness and a reading of the case records indicates that they are acquired or accidental cases of mental deficiency. From the standpoint of interpretation, this would seem of considerable importance.

With part of the purpose of the book, the reviewer finds himself in complete accord—namely, that one should not be satisfied with classifying cases of mental deficiency and then saying that, because they are constitutional, nothing can be done for them. However, any one who has visited the better schools for the feeble-minded in this country know that no such attitude exists in these places.

As to whether anything is gained by translating symptoms into psychoanalytic terms, opinions will vary. Attempts to explain everything from schizophrenia to amentia as due to ego defects, as many of the psychoanalytic schools seem inclined to do, are, this reviewer feels, adding nothing to our actual understanding of these cases. If all behavior must be formulated in psychoanalytic terms, then there is reason for carrying out such a piece of work.

The reviewer does not feel that the book adds much to our knowledge or understanding of this subject. It merely translates many of the accepted ideas about mental deficiency into psychoanalytic terminology. Obviously opinions will vary as to the necessity or value of such a proceeding.

KARL M. BOWMAN.

*Boston Psychopathic Hospital.*

INTRODUCTION TO PHYSIOLOGICAL PSYCHOLOGY. By Graydon La Verne Freeman. New York: The Ronald Press Company, 1934. 579 p.

In his preface to this book, Dr. Freeman states that he is making "no attempt to follow the furrows laid down by earlier treatises" in his approach to the subject of physiological psychology. This is very apparent when one compares his treatment with one of the most famous approaches to the subject—namely, that of Ladd and Woodworth in their *Elements of Physiological Psychology*, published in 1911. Freeman has emphasized the physiological aspect of the subject decidedly more than has been done in most of the books in this field.

There is a very complete and comprehensive description of the brain and the functioning of the central nervous system. In fact, the analysis is so complete and occupies so much of the book that the author has had to treat other aspects of the field more briefly than their importance would justify. The analysis of the sense organs and their functions is distinctly curtailed so as to give more space to a comprehensive treatment of the "motor" function.

The author has introduced many excellent diagrams and pictures which add greatly to the understanding of the subject. This, it seems, is very important in a textbook designed primarily for a beginner's course in such a highly specialized and technical subject. It also gives the student a much clearer idea of the type of apparatus used for experiments in this field than it would be possible to attain from a description of them. This is especially valuable for students in colleges and universities where the laboratory equipment is limited.

Chapter 10 gives a good description of the sympathetic nervous system both from the point of view of its structure and its relationship to the emotional life of the individual. This addition to the usual textbook treatment of physiological psychology is important in view of the recent experimental studies on the subject which have not been mentioned in many of the textbooks on psychology. It is unfortunate, however, that the author has given so little space (pages 129-130) to a description of the ductless glands and their relationship to the emotional life. This omission seems unwarranted in

view of the vast amount of experimental work in this field, and in view of the close relationship between the ductless glands and the emotional life of the individual. The author gives no explanation of this casual treatment of so important a topic in the field of physiological psychology.

The chapters dealing with the topics of intelligence and temperament (Chapters 26 and 27) are interesting, but for the most part inadequate in view of the vast amount of material available from the many experimental studies that have been made along these lines. The chapters on motivation and learning (Chapters 22 and 24) are, it seems, more complete and more comprehensive, in spite of the fact that relatively less work has been done in these fields than in the case of the topics mentioned above.

From the point of view of a beginner, the terminology of the book appears to be so technical that it is questionable whether it is not too difficult for a student who has not had at least one course in physiology or anatomy. The nature of the subject matter of the book, it is true, does not lend itself easily to a simplified treatment, but in many instances this objection could have been overcome by giving a more complete explanation of the less familiar of the technical terms.

On the whole, the book contains an excellent survey of the subject matter of physiological psychology and should, therefore, prove to be of great value to any student of psychology as well as to those whose primary interest is limited to this specialized field.

ELIZABETH B. HURLOCK.

*Columbia University.*

A TEXTBOOK OF PSYCHOLOGY. By Maude B. Muse. Third edition. Philadelphia: W. B. Saunders Company, 1934. 469 p.

MENTAL HYGIENE AND THE PUBLIC HEALTH NURSE. By V. May MacDonald. Second edition. Philadelphia: J. B. Lippincott Company, 1934. 72 p.

The first edition of Miss Muse's book, then called *Psychology for Nurses*, was published in 1925. Since that time the profession of nursing has advanced in dignity, increased its learning, and enlarged its scope of usefulness. This new revised edition of the text reflects this advance in the change in title, as well as in the enlarged content offered to students. It might be argued that students of nursing could learn psychology as easily from one of the standard texts on that subject, but because the nurse's "laboratory" is a hospital full of sick human beings, a study of human behavior that draws vividly upon her experience for its concrete examples is most suggestive.

The author has followed the changing emphasis in psychology and



has added considerable new material. There is a chapter on modern psychological schools, giving a brief characterization of each and emphasizing the use of the principles of reaction psychology in this book. The discussion of the influence of the endocrines on behavior has been rewritten, as has the chapter entitled *Native Traits and Tendencies*. An entirely new chapter has been added on the psychology of personality. This sums up admirably different points of view on personality, discusses the influence of heredity and environment, and stresses particularly the social aspects of personality. There are good illustrations, problems, and bibliographies with each chapter. The book should continue to be very useful, as were the earlier editions, in schools of nursing. For nurses who have already studied psychology in college or elsewhere, it should prove a good review.

Miss MacDonald's book is a new edition of the text first published in 1923. It is a practical guide for public-health nurses in dealing with the problems of mental health and disease which they meet so continuously in their work. It gives general suggestions on mental clinics, admission to mental hospitals, child-guidance clinics, and parent-education groups, as well as short descriptions of the chief mental diseases. It does not pretend to be exhaustive, but is a good introduction to the subject of mental hygiene and its application to public-health nursing.

ELIZABETH S. BIXLER.

*Yale University School of Nursing*

TEXTBOOK OF ABNORMAL PSYCHOLOGY. By R. M. Dorcus and G. W. Shaffer. Baltimore: Williams and Wilkins, 1934. 389 p.

This work is a most valuable contribution for the teacher of abnormal psychology. It is clear, concise, and remarkably fair in a highly controversial field. While it has not been adapted for use as an introduction to the study, it can be understood even by a person with a limited background in psychology or medicine. A young man who plans to enter college this fall borrowed the book from the reviewer, and to judge from his questions and general discussion, learned a considerable amount from it. It is noteworthy for its breadth of view and serviceability as a source book.

In general, the authors summarize the various theories before offering any conclusion, so that whether the particular conclusion is correct or not according to the reader's view, he has been given arguments and references on all sides. One bias does appear in the book, although the authors have apparently endeavored to exclude it. The examples chosen to illustrate psychoanalytic symbolization, particularly the one from Jung, indicate some prejudice against psychoanalytic theory.

The book should have wide use in classroom work in both colleges and medical schools.

C. R. ATWELL.

*Boston Psychopathic Hospital.*

HUMAN STERILIZATION TO-DAY. By Cora B. S. Hodson. London: C. A. Watts and Company, 1934. 57 p.

CONSTRUCTIVE EUGENICS AND RATIONAL MARRIAGE. By Morris Siegel. Toronto: McClelland and Stewart, 1934. 196 p.

Mrs. Hodson, for many years Secretary of the Eugenics Society (London) and now Secretary of the International Federation of Eugenics Organizations, has written a thoughtful, well-informed, and judicial little book on a topic of great contemporary interest. With more than 150,000,000 people (including the citizens of 27 American states) now living under eugenic-sterilization laws, it is a mere matter of good citizenship to understand what this means. The information that Mrs. Hodson gives about sterilization in Denmark, Switzerland, and Germany is particularly welcome in the United States.

Wherever it has been given a fair trial, Mrs. Hodson feels that sterilization has justified itself, and she looks for a continual extension of it on a voluntary basis (she opposes compulsion in this matter). Her report on sterilization in California, where she made extensive first-hand studies a few years ago, is particularly favorable. This state, as is well known, furnishes the greatest body of evidence to date, with more than 10,000 operations performed in the state institutions during a period of a quarter of a century. She also indorses strongly the conclusion of the Brock report, which recommended a voluntary-sterilization bill for Great Britain.

Even those who oppose sterilization on principle will find little fault with this sober and temperate booklet.

Dr. Siegel, a Canadian physician, has written a book intended to give a popular account of heredity and eugenics to laymen. He draws a vivid picture of the deterioration of the human race, due, he says, largely to the spread of inherited defects. He is skeptical, however, about all restrictive measures except segregation. His constructive program depends on wiser mate selection, to promote which he urges better education in eugenics and the establishment of a federal department to promote research in heredity and register pedigrees. While the book is inspired by a warm interest in human welfare, it has little scientific background.

PAUL POPENOE.

*Los Angeles.*

THE ETHICS OF SEXUAL ACTS. By René Guyon. Translated from the French by J. C. and Ingeborg Flügel. With an introduction and notes by Norman Haire. New York: Alfred A. Knopf, 1934. 383 p.

This is an important book, equally important for those who regard sex primarily from the biological point of view and for those who accept the moralistic conception as fundamental. It is in essence philosophical and ethical as well as scientific, for its purpose is to present logically the theoretical basis and the broad outlines of an attitude toward sex acts and sex ethics that is intended to be rational, humane, and at the same time in accord with modern psychological and biological knowledge. This attitude, as developed by the author, is in almost entire disagreement with the conventional moralistic view of Western institutional religion; yet it is essentially ethical, the author's "conception of the legitimacy of sexual acts demanding throughout the fullest respect for the liberty of others and the free consent (uncomplicated by any element of violence or deceit) of the sexual partner" (p. 341). The treatment is based upon Guyon's intimate acquaintance with sex customs throughout the world in contemporary and past cultures, viewed in the light of modern physiology and the Freudian theory of neurosis arising from repression. This book will stand as a classical formulation of the belief that, right or wrong, is taking an important place in modern thought—namely, that sex behavior, as such, should be removed from the sphere of morals.

The argument is based upon the oft neglected, but scientifically fundamental distinction between what the author calls the *sexual sense* and the *reproductive function*, a distinction that is made clear by comparing sex phenomena with "this reciprocal autonomy of function and sense" in other systems of the body. With so much established, the author devotes himself to showing at length the imperious nature and the personal and social values of the exercise of the sexual sense, as well as the circumstances and effects of its repression. Ultimately the various modes in which the sexual impulse may find expression are compared and evaluated, from the physiological, emotional, and moral points of view, and the ethical and legal distinctions that have been drawn between them in various cultures are critically examined. The author's argument brings him to a main physiological conclusion, which he states as follows (p. 344): "It is wrong to suppose that ordinary coitus is the only normal mode of *sexual satisfaction*: it is the only normal mode of *reproduction*, but that is quite a different thing." His ethical point of view is expressed in these words (pp. 379-81): "The exercise of sexual pleasure is legitimate, neither more nor less than that of the

pleasures procured through other senses. This exercise has nothing to do with morals. . . . Present-day sexual morality is responsible for dangerous neuroses, shameful hypocrisies, and grave social injustice." The acceptance of such a view, of course, would imply various social changes, and a later volume is promised (p. 383), dealing with the problems of birth control and human relations involved in proposals "which will, at one and the same time, be in touch with the fundamental truths of sex, insure the rights and liberties of the individual, and preserve the welfare of society."

In the course of the book the author deals critically and frankly with a great many topics of interest, among which are pre-adolescent sexuality, physiology of the sexual sense, the basis of sexual conventions, taboo, chastity, the neuroses due to repression, sexual aberrations and perversions, and "individualized love." The ideas are clear-cut and the style at once lucid and readable, even eloquent in many passages. An illuminating introduction is contributed by Dr. Haire, a successful London gynecologist, who comments on the logic and courage of M. Guyon's presentation of his thesis and points out that this book "is concerned only with the *theory* of the justifiability of various sexual acts. The author does not suggest that any person should offend against the legal sexual code obtaining in the particular country in which he lives; though one is justified in drawing the inference that M. Guyon would encourage all attempts to bring about the modification of such codes so that they accord better with what he regards as right."

It may be remarked in conclusion that while few, perhaps, will be able to go all the way with the author, all who are concerned with the question of sex and morals will find interest in his uncompromising analysis.

H. M. PARSHLEY.

*Smith College.*

GENEALOGY OF SEX. By Curt Thesing. Translated from the German by Eden and Cedar Paul. New York: Emerson Books, 1934. 286 p.

This most excellent book follows its title closely. It traces the origin and growth of the component factors of the sex impulse from their earliest appearances in unicellular animals to their final expression in man. Each point is so thoroughly elucidated by innumerable explanations of the habits of lower animals that the book is encyclopedic with reference to sexual habits and customs throughout the animal kingdom. Nevertheless, the author has carefully held to the main thread of his story—the development of the sexual instinct in

human beings—despite the detail necessarily introduced by the use of so many examples of sexual habits of animals.

The book opens with the questions, "Why do men and women kiss one another? Why do they do so more especially in the early prime of life? Why, above all, in the springtime?" According to the author, "the sexual impulse, like hunger, gives rise to disturbances in the body, arouses a sense of discomfort, a yearning, a sense of internal unrest. Dependent primarily upon chemical tensions, this feeling of unrest impels males and females of the same species to the sexual act, which discharges the aforesaid tensions and relieves their discomfort, so that, though they know not what they do, by their action they fulfil the main purpose of organic nature—reproduction, multiplication, the preservation of the species." "It is not a wish for offspring that produces the impulse that brings the sexes together. Reproduction is the outcome of blind instinct, is but one of the manifold ways in which nature sees to it that the life of the species shall be continued. A knowledge that coitus and reproduction are intimately connected, the conscious performance of the act of copulation in order 'to raise up seed,' appears in the world at a comparatively late stage in the history of the human race when man has achieved a considerable level of civilisation." Also, the author believes that "the sexual impulse, likewise, is one of nature's essential resources, and cannot be regarded as in itself sinful or objectionable. In itself it is neither good nor bad, 'but thinking makes it so.'"

The general idea upon which the book is built is well illustrated by the following quotation from it: "Even in the art of love, which especially among Orientals has been raised to the level of a science, man has discovered nothing for which a precedent did not exist in the animal kingdom."

The various sexual trends, each treated in a separate chapter, are then traced. Some of the titles of these chapters are: *Amatory Life of Hermaphrodite Animals*; *Awakening of the Sexual Impulse*; *The Emancipation of Woman*; *Lures and Stimuli*.

The book closes with an excellent chapter on love in human beings, in which love amongst a primitive people—the Trobriand Islanders, who "obey the biological laws of nature more candidly and more unrestrainedly than we do"—is thoroughly discussed.

Great credit must be given to the translators, Eden and Cedar Paul, who have achieved a rendering that reads as if the book had been written originally in English.

WILLIAM F. MENGERT.

*University Hospitals, Iowa City.*



**SEX HABITS; A VITAL FACTOR IN WELL-BEING.** By A. Buschke, M.D., and F. Jacobsohn, M.D. Translated from the German by Eden and Cedar Paul. New York: Emerson Books, 1933. 204 p.

The authors of this book have attempted a treatise for the sexual guidance of the layman. The first half of the book is devoted to the anatomy and physiology of the male and female reproductive organs. The second half is concerned with more general and philosophic matters, such as the sexual impulse, abnormalities of the sexual life, heredity, eugenics, and so forth.

The chapters on anatomy and physiology are quite good, though the phraseology leans somewhat toward the scientific. The authors are urologists, specialists in the diseases of men, and in general the viewpoint is masculine. The woman's side of the matter is not stressed as much as it might be. There is also a good deal of opinion, which, though not unsound, tends to be dogmatic.

WILLIAM F. MENGERT.

*University Hospitals, Iowa City.*

**NEW PATTERNS IN SEX TEACHING.** By Frances Bruce Strain. New York: D. Appleton-Century Company, 1934. 241 p.

Mrs. Strain puts here into book form the sort of counsel a capable leader tries to give to mothers' study groups attacking the subject of sex for immediate help in meeting day-by-day happenings. Except for omitting the father as a love object in the emotional development of the boy and the girl, and being at times unduly optimistic as to the comfortable lack of curiosity of questioning children when parental answers verge on delicate ground, the author presents a well-thought-out and practical scheme for considering the sex needs of children in accordance with the present convention of interpreting sex as if it were merely for reproduction. Happily combining the experience of a professional sex educator and a mother, she is tactful enough to change the ideas of an audience without arousing its antagonism, and straightforward enough to command the respect of those who are already committed to a modern philosophy of sex orientation, but who want the poise that comes from practice. Representative questions and suggested answers add to the interest and value of the book.

The music this book, in common with so many others, does not face is the intrinsic pleasurable and biological value of the sex union entirely apart from its reproductive and affectionate purposes. One may wonder for how many more generations we are to go on leading our sons and daughters into unnecessary emotional conflicts by our implicit denial of the restorative powers of the physical sex union, *per se*. Is it any wonder that a large proportion of women find their sex nature more of a liability than an asset, both in and out of mar-

riage, or that men so often fail to make the most of this human resource? Is not the cause of much adolescent and adult emotional strain the inability to reconcile the ethereal sex ideals of childhood with the more robust and far-reaching facts of real life? Why is it not nice to let a pre-adolescent or an adolescent know that for the mature physical sex intercourse is so intimately tied up with the well-being of the whole organism that it has a re-creative power comparable to that of food and sleep? So long as we sidestep by telling our children only that the sex embrace is an expression of love and the means of reproduction, are we not bound to have a perpetual succession of adults who, by their psychic protest against the mature interpretation of sex, counteract its somatic values?

GLADYS HOAGLAND GROVES.

*Chapel Hill, North Carolina.*

PREPARATION FOR MARRIAGE. Edited by Kenneth M. Walker, M.D.  
New York: W. W. Norton and Company, 1933. 153 p.

The material in this book was originally prepared from manuscripts submitted by clergymen, physiologists, psychologists, anthropologists, and an expert in genetics. The author states that, having read the manuscripts, he rewrote the material in accordance with his own ideas regarding the subject. The book is well written, but a little dull, and is so filled with explanations, in the author's effort to substantiate his views, that one gets the feeling that he is none too sure of his facts. Since they are largely unscientific, he might well question them. In his effort to combine the religious and the scientific points of view, he presents neither very well. The chapter on the place of marriage in human life is largely a reiteration of what any intelligent and educated person already knows. The reasoning is often faulty. For example, on page 42, in the chapter on marriage and the family, we find the statement: "One of the first things we notice is that among no people is the satisfaction of the sexual appetite left free and unrestrained."

From the psychological point of view, the book has not much to recommend it. The case histories are poor; they do not prove their points, and in some instances are absolutely misleading. The attitude toward sex might be described as old-fashioned, and it is to be hoped that no one reading the book will be misled by the author's treatment of auto-eroticism, which is repeatedly referred to as "self-abuse."

The titles of the chapters are the best features of the book. They are as follows: *A Point of View; The Place of Marriage in Human Life; The Essentials of Marriage and the Family; Courtship; Sexual*

*Intercourse; Adjustment in Marriage; Children; Fertility and Sterility; Birth Control; Continence; Aberrations of Sex; Advice to Advisers.*

WILLIAM B. TERHUNE.

*Austen Riggs Foundation, Stockbridge, Massachusetts.*

VICE IN CHICAGO. By Walter C. Reckless. Chicago: The University of Chicago Press, 1933. 314 p.

Some years ago the reviewer directed attention to that symbolic process by which meanings invested with taboo are represented by words of a more generalizing character. The word "vice" is among the widespread instances of this. Most persons will understand the title of the present volume for what it means—commercialized sexuality, particularly the cruder sorts. The book, one of the University of Chicago Sociological Series, is a detailed and clear-cut account of this pattern, covering particularly the last twenty years. It is well put together, thoroughly documented and summarized, perhaps too briefly indexed. To serve its essential purpose, an index must be quite full, and there is too much current tendency to make it a brief formality. The main significance of the volume is as a source book, and to objectify the progress of changes that are vaguely perceived by the casual observer, as the recession of the brothel in favor of "clandestine" patterns.

F. L. WELLS.

*Boston Psychopathic Hospital.*

ATTITUDES AND UNEMPLOYMENT; A COMPARISON OF THE OPINIONS AND ATTITUDES OF EMPLOYED AND UNEMPLOYED MEN. By O. Milton Hall. (Archives of Psychology, No. 165.) New York: Archives of Psychology, 1934. 65 p.

This is a study of the effect of prolonged unemployment upon the mental attitudes of a group of nearly five hundred professional engineers, based on a comparison with an equal number of employed engineers whose general status was in other respects similar. The reactions considered related to their attitude toward employers, their occupational morale, and their attitude toward religion, as affected by unemployment. The findings in general support the conclusion that one would have expected—namely, that unemployment has had an unfavorable and unstabilizing influence. The unique factor of the study is the attempt to measure the varying degrees to which this influence enters among different groups.

Mr. Hall found, for example, that half the unemployed, but only 20 per cent of the employed, thought that business advancement came through pull. Twenty-three per cent of the unemployed as against

6 per cent of the employed thought that "a revolution might be a good thing for this country." Thirty-four per cent of the unemployed favored a dictator as against 19 per cent of the employed. Three times as many unemployed as employed men felt that it didn't pay to work too hard. Forty per cent of the employed thought that religion was an opiate for the people, and 54 per cent of the unemployed agreed. So it goes through numerous items. Yet on the question of the value of labor unions, preconceived ideas were so strong that the difference in reaction was only 1 per cent.

This is a neat and succinct controlled experiment to show what people have to be recurrently reminded of—that reasonable security of tenure of job and satisfying creative work outlets are indispensable to mental, no less than to material, well-being. Mr. Hall fortunately does not try to prove too much. There is no suggestion that honest scepticism regarding the wisdom of our present methods of assuring (or not assuring) employment is itself a sign of mental unbalance. He merely shows that more questions about these methods may arise in the minds of those who are out of work. Problem-solving efforts are always, of course, begun only after a forceful and distressed recognition of a problem.

If our institutional economic predicament is a problem, perhaps more unemployment is needed to make people face it frankly! Mr. Hall does not say this, either. But a study of these attitudes altered under duress—and altered in a critical direction—does make one wonder how the attitudes of those who live in relative security are ever to be made more critical and more anxious to identify and solve the economic problems so urgently before us for solution.

This is a highly useful confirmation of the claim that unemployment works its disturbing consequences upon the mind, no less than upon the body.

ORDWAY TEAD.

*New York City.*

## NOTES AND COMMENTS

*Compiled by*

PAUL O. KOMORA

*The National Committee for Mental Hygiene*

### THE NATIONAL COMMITTEE CELEBRATES ITS TWENTY-FIFTH ANNIVERSARY

The completion of a quarter of a century of organized work for mental health in the United States was celebrated by The National Committee for Mental Hygiene in New York City on November 14. The main event was a dinner meeting, held at the Waldorf-Astoria Hotel, at which the twenty-fifth anniversary of the founding of the National Committee was formally observed. Five of the seven surviving founding members of the Committee and over 600 persons from various sections of the country, representing mental hygiene, psychiatry, psychology, general medicine, education, social work, law, and other fields, gathered on this occasion to pay tribute to the achievements of Clifford W. Beers and the now world-wide movement he started. A special meeting devoted to a discussion of mental-hygiene problems in childhood was held in the afternoon. Between 500 and 600 persons, mostly teachers from public schools in New York and surrounding territory, attended this session.

The speakers at the commemorative dinner were President James R. Angell, of Yale University; Dr. Adolf Meyer, Professor of Psychiatry at John Hopkins University; Dr. M. J. Rosenau, Professor of Preventive Medicine and Hygiene at Harvard Medical School; the Hon. Jacob Gould Schurman, former Ambassador to Germany and former President of Cornell University; Dr. Arthur H. Ruggles, President, and Dr. Clarence M. Hineks, General Director of The National Committee for Mental Hygiene; and Mr. Beers, founder and Secretary of the National Committee and other related organizations for mental hygiene.

President Angell, who sponsored at Yale one of the first college mental-health programs to be set up in this country, spoke on the significance of mental hygiene in the broad field of education; Dr. Meyer, a founding member of the National Committee, traced its beginnings and early development; Dr. Rosenau discussed the place of mental health in the public-health movement; Dr. Schurman, another founding member, summed up the importance of the National Committee's work and its influence in other fields of human endeavor;



Dr. Hincks, founder of the Canadian National Committee for Mental Hygiene, the first national mental-health agency organized outside of the United States, described some of the (U. S.) Committee's more recent activities and its plans for the future; and Mr. Beers gave an intimate account of some of his experiences in organizing the National Committee and the mental-hygiene movement in general. Dr. Ruggles presided at the dinner and also opened the afternoon meeting, at which the speakers were Dr. Ira S. Wile, formerly Commissioner of Education, New York City; Dr. Carleton W. Washburne, Superintendent of Schools, Winnetka, Ill.; and Dr. James S. Plant, Director, Essex County Juvenile Clinic, Newark, N. J.

All the addresses at both meetings are printed in full in this number of *MENTAL HYGIENE*. A milestone in the history of the mental-hygiene movement, this collection of papers represents an unusually interesting and readable record and interpretation of its progress and accomplishments during the past twenty-five years and an intriguing forecast of its potentialities and significance in the years to come.

#### ANNUAL MEETING OF THE CANADIAN COMMITTEE FOR MENTAL HYGIENE

The Sixteenth Annual Meeting of the Canadian National Committee for Mental Hygiene was held in Montreal on December 7. A number of out-of-town visitors were present, including Mrs. D. A. Dunlap, of Toronto, in whose home the organization meeting of the Committee was held some eighteen years ago.

The board of directors, with Mr. E. W. Beatty, K.C., in the chair, met at luncheon in the Mount Royal Club. Most of the directors were present, as were the officers of the association, together with the guest speakers and the Honorable Dr. Macmillan, Premier of Prince Edward Island.

The business meeting followed on the luncheon. Dr. Clarence M. Hincks, Director of the Committee, presented a brief review of the activities of the organization during the past year, dealing particularly with the apparent effects of the depression upon the mental health of the country. Dr. Grant Fleming, Medical Director, described certain services rendered to provincial governments, and reported the completion of a study of the Japanese in Canada made by the Immigration Division of the Committee under the direction of Dr. Helen R. Y. Reid.

A public session was held in the ballroom of the Ritz-Carlton Hotel at five o'clock in the afternoon. The chair was taken by Dr. Charles F. Martin, Dean of the Faculty of Medicine at McGill University, who has been President of the Canadian Committee since its organi-

zation. In his opening remarks, Dr. Martin stressed the importance of the preventive aspects of mental disease.

"Ten and a half million dollars," he said, "are spent annually on the custodial care of 30,000 of our population now in mental hospitals, a large proportion of whom might never have reached that saddest of all conditions had early prevention been adopted.

"Governments and the public have much yet to learn about the early stages of mental disease, and most of all in the field of its prevention. Surely for the well-being of our social existence it is just as important to study the causes of mental disease and the methods of controlling it as it is to compile the statistics of chicken pox, measles, and rickets.

"There is a certain amount of pathos in the indifference with which society regards the minor moral and mental deviations in children, and in the lack of understanding and appreciation of the deep-seated factors that lead to truancy, to stealing, to minor and even major crimes, to the rise in the divorce rate, to the degradation of our homes.

"It is in these so-called defects in the early upbringing of the child—defects in his discipline, his education, and his environment—that one finds many of the factors which lead in later life to the most serious of nervous disturbances. Even the matter of early speech defects, the stammering and stuttering of children, the thousand and one behaviorisms and idiosyncrasies which perpetually hinder and embarrass them in their careers and social intercourse is usually given little, if any, consideration.

"One million people exist to-day in the United States—most of them children—who suffer from speech defects, and who yet receive less effective treatment than that given to the care of tonsils. For all of these how little is being done to correct the disability which, if avoided, would not only check the tendency to serious mental breakdown, but would make them valuable citizens in the community!

"Problems such as these are the tasks that our National Committee undertakes in order to offset the trends that warp the family life. The hope is ever present that these efforts may be just as productive for mental health as those of Pasteur in the realm of infectious disease."

Dr. William E. Blatz, Director of the St. George Institute of Child Study, Toronto, addressed the meeting on adventurous living and mental health, and Mr. Clifford W. Beers, founder of the mental-hygiene movement and Secretary of the United States National Committee for Mental Hygiene, spoke on the development and growth of mental hygiene as a continental and world-wide movement since its inception twenty-five years ago.

#### TWENTY-FIFTH ANNIVERSARY OF THE NEUROLOGICAL INSTITUTE

On December 20 the Neurological Institute of the Columbia-Presbyterian Medical Center in New York City celebrated the twenty-fifth anniversary of its founding. Messages of congratulations, commending the achievements of the institute and its pioneer work in the study and treatment of diseases of the brain and nervous system,

were received from President Roosevelt, Governor Lehman, and other leaders in American life. The speakers at the exercises included Dr. Joseph Collins, sole survivor of the three original founders of the institute; Dr. Bernard Sachs, retiring President of the New York Academy of Medicine; Dr. W. C. Rappelye, Dean of Columbia Medical School; Dean Sage, President of the Presbyterian Hospital; Dr. Frederick Tilney; Dr. Edwin G. Zabriskie; and others associated with the Institute.

The purpose of the institute, as formulated by the founders—Dr. Joseph Collins, Dr. Pearce Bailey, and Dr. Joseph Fraenkel—was threefold: To establish and maintain a hospital for the care and treatment of persons afflicted with diseases of the nervous system; to train physicians and nurses in the care and treatment of nervous diseases; and to carry on research and investigation in this field. Its first home was an old building with antiquated equipment and 83 beds. In 1929 it affiliated with the Columbia Medical Center and moved into a new \$2,000,000 building equipped to care for over 200 patients, both adults and children. It also maintains a private clinic at its hospital and cares for other out-patients in its department at the Vanderbilt Clinic.

In addition to its regular services, the institute has facilities for the study and treatment of special neurological problems. Since 1929 it has developed a broad and far-reaching program of scientific research, its more recent activities along this line including, among others, the investigation and treatment of encephalitis (erroneously known as "sleeping sickness"), brain tumors, birth injuries, language disabilities of children, and studies in the correlation of behavior and brain development. Last year the board of education established a school at the institute for the special educational and medical needs of birth-injured children.

#### RESEARCH IN DEMENTIA PRAECOX

Thanks to the far-sighted benevolence of the Scottish Rite Masons, it is now possible to launch a fundamental attack on the most baffling problem of mental medicine—dementia praecox, prime destroyer of mental health, whose victims fill more hospital beds in this country than those of all other forms of mental disease combined. The acquisition of a deeper and more detailed knowledge of the nature and causes of this dread disease, now so obscure to medical science, will be the first objective. The best minds in the profession and the best available laboratory, hospital, clinical, university, and community resources in the country will be enlisted in the effort. A special committee, composed of some of the foremost leaders in American psychiatry, is in charge of the project. The members of this com-

mittee, which is functioning as a "board of strategy" to map plans for the campaign, are: Dr. Arthur H. Ruggles, of Providence, R. I., Chairman; Dr. Albert M. Barrett, of Ann Arbor, Mich.; Dr. Clarence M. Hincks, of New York; Melvin M. Johnson, Sovereign Grand Commander, Supreme Council 33° A. A. Scottish Rite, Boston; Dr. Adolf Meyer, of Baltimore; Dr. Winfred Overholser, of Boston; Dr. Edward Strecker, of Philadelphia; and Dr. William A. White, of Washington, D. C.

An initial fund of \$15,000, to be administered by The National Committee for Mental Hygiene, has been voted by the Supreme Council, 33°, Northern Masonic Jurisdiction, U. S. A., for this purpose. The first year's work of the committee will be directed to fact-finding and to a general study and formulation of the problem and the goals to be aimed at. A study will be made of existing research projects in the United States, existing methods of treatment and control of the disease will be examined, and various scientific approaches will be appraised with a view to discovering the most promising leads. An attempt will be made to seek out the scientists of most promise in research work in this field, and to identify those agencies whose organization, facilities, personnel, and quality of work mark them as most worthy of support and development. Dr. Nolan D. C. Lewis, Director of Laboratories at St. Elizabeths Hospital, Washington, D. C., has been appointed as field representative of the National Committee to carry on this phase of the work.

Subsequent activities contemplated as a result of this preliminary work will include (1) financial support of selected research projects; (2) stimulation of interest in and aid to psychiatric research in scientific institutions, with special reference to projects supported by university and state budgets and by private corporations; (3) the encouragement throughout the country of measures and developments aimed at the early diagnosis, prompt treatment, and prevention of dementia praecox; (4) the exchange of experience between research workers in the field through periodic conferences summoned by the accredited representatives of The National Committee for Mental Hygiene; and (5) educational activities directed to the medical profession, special groups, and the general public.

#### A MENTAL-HYGIENE STUDY OF THE SELECTION AND TRAINING OF TEACHERS

An attempt to determine what can be done to improve the caliber and fitness of public-school teachers from the standpoint of personality and mental health is the object of a nation-wide study just launched by The National Committee for Mental Hygiene. The inquiry, which has been financed for the period of a year by the

Carnegie Corporation, is under the direction of an educator, Harold L. Holbrook. In its preliminary phase it will deal with the evaluation of existing methods in teacher training and selection, and the study of ways and means of improving them for the benefit alike of the teaching profession, the schools, and their pupils.

The project grew out of the belief expressed by students of mental-hygiene education that the regimentation in schools and the emphasis on subject matter in current teaching practice have in too many instances been developed to such a point that they are harmful to the children, and that certain reforms in the present system may well contribute to the prevention of mental disabilities, conduct and personality disorders, and other forms of individual and social maladjustment. "It is fully realized, however," Mr. Holbrook states, "that progressive educators are aware of the problem and are developing forward-looking methods to deal with it, and the present study seeks to supplement and reinforce their efforts."

The first step will be a canvass of the experience of educators and specialists in guidance as to the types of teacher who have exerted a harmful influence upon the mental health and adjustment of their pupils.

"The pupil personality pattern that is most acceptable to the teachers, according to traditional standards, and is exemplified in the serious, 'good' little boy," Mr. Holbrook says, "is not necessarily the pattern that is most desirable and healthiest for the child.

"If these views are correct, it is exceedingly important that we find out if school methods are at fault and if school children are being unnecessarily subjected to stresses and strains that are deleterious to mental health and the development of healthy and wholesome personalities.

"The usual methods for dealing with mental disorders in the past has been to try to cure them or to care for the patients after the ailment develops. In recent years adult and child guidance has been developed as a means of prevention. Now we shall try to go a step further, to see whether the conditions under which children study need to be altered and improved.

"Because of the magnitude of the problem, we have limited our goal for the present to the study of the training and selection of teachers. This is a logical place for an entering wedge, not only because of the obvious importance of having teachers with favorable personalities in the classrooms, but also because we wish to know whether the present methods of training and selection give us teachers of the right type.

"It would appear to us that the ideal teacher is not the one with a good intellectual equipment alone, but with a rich and well-balanced



emotional life as well. The problem, therefore," Mr. Holbrook continues, "is one of knowing more surely what constitutes a desirable teacher, and what methods of selection and training are most effective in producing such teachers."

He explains that there is no intention to seek out unfit teachers or to eliminate them through the study, but that if it will help to weed out the least fit, from a personality standpoint, among future teaching candidates, the project will be considered successful.

The program calls for:

1. A study of the personalities of individual teachers who are having a beneficial influence upon pupils, from the mental-hygiene point of view, as well as those who are having a detrimental effect.
2. A survey of representative training institutions and an analysis of training methods with special reference to personality values in prospective teacher selection and elimination and the development of more effective procedures.
3. Research to discover practicable methods for the personality appraisal of candidates for teacher training, appointment, and re-appointment to teaching positions.
4. A canvass of the views and convictions of representative psychiatrists and educators concerning the fundamentals in mental hygiene that should be acquired by teachers in training.
5. An attempt to set up in a number of strategic centers experimental demonstrations in teacher selection and teacher training to test out the merits of various techniques and procedures.

Mr. Holbrook, who serves on the staff of The National Committee for Mental Hygiene as Director of School Studies, comes from New Haven and is on the staff at Yale University as a lecturer in educational and vocational guidance. He is also consulting psychologist to the Connecticut State Hospital for Mental Diseases at Middletown, and Chairman of the National Committee on State Guidance Programs of Washington, D. C. For twelve years he was on the staff of the Pennsylvania Department of Public Instruction.

The special committee in charge of the study includes Dean Herbert E. Hawkes, of Columbia University; Dr. H. W. Potter, formerly Assistant Director of the New York State Psychiatric Institute and Hospital; Dr. Bernard Sachs, President of the New York Academy of Medicine; Orlando B. Willcox, of New York; and Dr. George S. Stevenson and Dr. Clarence M. Hincks, of The National Committee for Mental Hygiene.

## STATE SOCIETY NOTES

*Illinois*

Dr. Frankwood E. Williams, former Medical Director of The National Committee for Mental Hygiene, was the guest speaker at the annual meeting of the Illinois Society for Mental Hygiene held in Chicago on November 23. Taking as his topic "Mental Health and Social Forces," Dr. Williams presented his views on the present-day position of the mental-hygiene movement in this country and, in the light of his recent studies in Soviet Russia, defined what he considered to be its proper objectives in relation to the social and economic order here.

The past year was an especially productive one in the Illinois Society's work, Miss Helen L. Myrick, Executive Secretary, said in presenting her annual report. Among its outstanding activities were an appraisal of private sanatoria for nervous and mental cases; a study of psychologists in private practice; an investigation of the activities of quacks and charlatans; an experiment in coöperative mental-health services through psychiatrists in private practice, for the benefit of patients of moderate means who cannot pay the regular fees, but who have some income and are above the level of clinical fees; supervision of a psychiatric service for unemployed women; the successful enlistment of public and official support to insure a continuing budget for the psychiatric clinic at the municipal court; educational work in recreation camps and among the unemployed under the auspices of local relief and social-work agencies; several series of radio talks and numerous lectures to parents and teachers, to the personnel of child-caring institutions and nursing schools, and to various other educational, civic, industrial, church, and social groups; and personal counseling to numerous individuals with life problems that call for psychiatric help and guidance.

*Massachusetts*

The Massachusetts Society for Mental Hygiene held its annual meeting in Boston on November 22, with Dr. Donald Gregg, president of the society, in the chair. The guest speaker was Dr. Robert Ulich, Visiting Lecturer on Comparative Education, Graduate School of Education, Harvard University, and formerly Counselor in the Ministry of Education, Saxony. Dr. Ulich, who is regarded as one of Germany's leading philosophers of education, spoke on "The Influence of the New Psychology on Education." His address is published in full in this issue of MENTAL HYGIENE.

An encouraging report on the work of the society during the past year, its financial status, and its future prospects was presented by

the medical director, Dr. Henry B. Elkind, who summed up its present position in these words: "We feel that our present program is essentially sound. We offer no panaceas; our outlook is conservative in respect to what mental hygiene can accomplish. We realize, too, that with the restrictions which present-day economics impose upon our financial resources, we do better when we specialize in one of the major fields of interest, rather than when we spread ourselves thin in attempting to cover the many fields open to us. This field has been education—our public system in particular." Having completed nearly ten years of service as medical director, Dr. Elkind listed the following as "the most significant accomplishments" of the society during his term of office:

1. The promotion of mental hygiene in the fields of social work, public-health nursing, child hygiene, juvenile delinquency, criminology, and probation, largely by means of conferences, individual lectures, and lecture courses under state-university extension.
2. The promotion of mental hygiene in industry, mainly through publication of *The Human Factor*, a quarterly which the society distributed free to personnel executives throughout the state for a period of over three years.
3. The Mental Hygiene Survey of Boston, which made an appraisal of the city's mental-hygiene services and offered recommendations as to its opportunities for greater and more effective service.
4. The stimulation of statistical research in the fields of mental disease, mental defect, and crime in various state departments and the Boston Psychopathic Hospital.
5. The expansion of the society's field work into all parts of the state, made possible through an increase of staff and the organization of four district advisory committees with a total membership of approximately 500.
6. The promotion of mental hygiene in the field of education, first, through the publication by the society of *Understanding the Child*, a quarterly devoted solely to the professional needs of the teacher; secondly, by the Mental Hygiene Survey of the State Teachers Colleges, recently concluded; and thirdly, through providing courses of professional training in mental hygiene for public-school teachers in service.
7. Fairly stable finances, larger budgets, and slowly increasing endowment funds.

In conclusion, Dr. Elkind gave his conception of state-society aims as follows:

"Mental hygiene as a public-health movement needs no justification to-day. Its place in the broad field of public health and social welfare is firmly entrenched and permanently assured. In my opinion

mental hygiene should consider its main task for the next few years that of satisfying its needs for a wide, sound, and factual basis for the principles and techniques it proposes. It would indeed be an interesting experiment for a mental-hygiene society to try out the idea that a promotional organization mainly devoted to educational work should first test its teachings and tenets in the crucible of soundness and accuracy before giving them its stamp of approval. It would also seem wise to include research as an integral part of its program. Perhaps the next few years will give us the opportunity to bring this about."

#### *Missouri*

The Missouri Society for Mental Hygiene reports that the governor has recently appointed a committee to formulate and submit plans for the improvement of state institutions for the mentally ill. It is confidently expected that a substantial part of the \$10,000,000 bond issue voted last May for the enlargement and improvement of state institutions will be available for mental hospitals. A committee of the Missouri Conference of Social Welfare is also at work on legislative proposals for the establishment of a state department of public welfare, with a mental-hygiene division to take over the supervision and control of all state mental institutions and to develop a comprehensive state mental-health program for prevention as well as treatment.

A bond issue of \$16,000,000 has also been voted by the City of St. Louis, of which approximately \$7,000,000 is earmarked for city institutions. The proceeds, under a plan now contemplated, will be used for the erection of a new psychopathic hospital, for improvements in the present city sanitarium, a new observation ward for mental cases in the city hospital, additional buildings at the local school for the feeble-minded, and for other purposes. The Missouri Society is actively promoting these projects and is putting at the disposal of the authorities the best available expert advice to insure the development of a sound working program. In this way, and with the backing of a strong public opinion, the society hopes that the best possible use will be made of the bond-issue monies.

#### *Texas*

A group of 133 people assembled in the hall of the House of Representatives in the State Capitol Building in Austin, Texas, on November 19, for the purpose of organizing a state society for mental hygiene. After the presentation of reports by members of a steering committee appointed at an informal meeting held in Austin last spring, the group engaged in a general discussion of objectives and

organization procedures. Dr. George S. Stevenson, of The National Committee for Mental Hygiene, then addressed the meeting and outlined the experience of other state societies as a suggestive guide to the study and development of a suitable program of work in Texas. Leaders in medicine, education, social work, law, and other fields submitted various suggestions as to mental-health needs in the state, and expressed the hope that the society would launch a vigorous attack on vital problems now pressing for attention. A determination to "see it through" to a successful functioning was reflected in the unanimous approval of the project voted by the group, and in the proposal to enlist members for the society at once. A total of 37 paid their dues "on the spot" and a six-months period, expiring May 19, 1935, was set in which to build up a charter membership. A constitution and by-laws were presented and adopted and the "Texas Society for Mental Hygiene" was voted as the official name of the organization. In conclusion, Dr. T. W. Buford was elected temporary chairman, and an advisory committee was appointed to assist him in drawing up a slate for the election of officers and a board of directors to serve until the first annual meeting of the society.

#### *Wisconsin*

The Milwaukee Mental Hygiene Council has developed its activities and widened its scope to such an extent since its formation in 1930 that it was recently decided to reorganize it on a state-wide basis as the Wisconsin Society for Mental Hygiene. The varied and solid achievements of this group during its brief period of existence are a credit to the initiative and leadership of its indefatigable executive secretary, Miss June J. Joslyn. Her report on approximately five years of work under difficult economic conditions is a challenging example of what a trained and alert mental-hygiene worker can accomplish with limited resources in hard times.

During the first three years of its work, the council's main objective was an educational program with parents, teachers, social workers, nurses, and other groups. The secretary alone has given 476 talks, 281 of these being in series of from four to sixteen. In 1932, with the appointment of Dr. R. A. Jefferson as medical director, the council extended its activities into the clinical field. The consultation service to professional workers dealing with mental-hygiene problems was then enlarged to include full clinical service for a limited number of cases. With the coming of Dr. Gilbert Rich, as Director of the Milwaukee County Mental Hygiene Clinic, a treatment program was initiated to replace the former diagnostic program, a forward step much appreciated by the social agencies. For a year and a half, the medical director and the secretary also conducted a



part-time clinical and educational service in Superior, in connection with the public schools. A visiting teacher has since been appointed in this city.

A notable achievement of the council was its financing and management of a mental-hygiene demonstration for the Visiting Nurse Association in Milwaukee, following two years of educational work at the local school for public-health nursing. As a result, a trained psychiatric social worker was added to the association's staff for a two-year period. The need of a mental-hygiene service has been definitely accepted and the appointment of a permanent worker for this purpose is now planned.

When the council began its work, there was only one psychiatric social worker in Milwaukee. To-day there are fourteen such workers, thanks to its educational and promotional work. Interest in the mental-health aspects of case-work has increased enormously, and most of the case-working agencies now want psychiatrically trained workers on their staffs. Another achievement has been its participation in the pre-school "round-up" of the parent-teacher associations in the Shorewood Schools, during which the mental-hygiene difficulties of a group of 115 children were studied and, for four years, followed up and corrected with the help of the local visiting teachers. Mental hygiene is now an integral part of the round-up and both parents and teachers consider this service invaluable.

With the resignation of Dr. Jefferson, the society's clinical work has been temporarily suspended, but the educational results of this work continue in evidence and new efforts will be made to reestablish this service. The usual consultation work will be carried on in the meantime, and an active program of activities is being developed in other directions. Special attention is being given at the moment to legislative proposals for the improvement of the state's mental institutions. The society has also begun the publication of a periodical mental-hygiene bulletin.

#### PSYCHOTHERAPY IN A GENERAL HOSPITAL

The State Psychopathic Hospital at Ann Arbor, Michigan, a pioneer in the advancement of psychiatric research and training and the first university psychiatric hospital established in this country, has added another link to the chain that is uniting physical and mental medicine in the study and treatment of human ills. With financial aid from the Rockefeller Foundation, whose large benefactions have been a powerful factor in the progress of medical science and public health the world over, this institution has recently set up at the University of Michigan medical center in Ann Arbor a new department to deal with psychiatric problems in medicine. Installed in the general hos-

pital and known as the Psychotherapy Clinic, this project brings the State Psychopathic Hospital into still closer relationship with the other medical divisions of the center. According to Dr. Albert M. Barrett, Director, it has already been "of tremendous value in bringing psychiatric matters to the attention of the physicians and staffs, as well as students, working in the general hospital." Dr. Robert M. Dieterle, an assistant of Dr. Barrett's, is in charge of the division.

Symbolic of the reaction away from the impersonal study and treatment of disease characterizing the age of science and the specialist, this new service will emphasize the personal element and bring to the aid of the physician who treats physical ills the psychiatrist's broader knowledge and human understanding of the personality and the psychological and emotional components of disease in all its manifestations, physical and mental.

#### COLUMBIA DEAN URGES PHYSICIANS TO STUDY PSYCHIATRY

Medical schools should devote more attention to the study of mental and nervous disorders, Dean Willard C. Rappelye, of the College of Physicians and Surgeons, Columbia University, New York City, said in his recent annual report. These disorders, he writes, cause "more incapacity, distress, and economic burden than any other form of illness." He also asserts that there is a serious shortage of properly trained specialists in this and other departments of medicine, owing largely to lack of facilities for their training and to the absence of proper educational supervision in the hospitals where such training may be given.

The extent of nervous and mental disorders and the limited knowledge of their causes are a challenge of the first magnitude, Dean Rappelye says. Physicians, he believes, need a much more competent appreciation of the important rôle which functional and nervous disorders play in the everyday health of individuals.

"What obviously is needed," the report continues, "is a better understanding of the relationships of mental and emotional disturbances to general health and an infiltration of the training in general medicine, with a much greater appreciation than now exists of the rôle which environmental, social, emotional, and psychological factors play in the general health and well-being of an individual."

#### WORCESTER OFFERS PSYCHIATRIC INTERNESHIPS

The Worcester (Massachusetts) State Hospital announces that six psychiatric internships of twelve months' duration will be available there, beginning July 1, 1935. This opportunity for training in psychiatry is open to graduates (unmarried men) of Class "A" medical schools who have completed an accredited internship in medicine.

The hospital will provide maintenance. The internships will involve a rotating service on medical and surgical wards and male and female psychiatric wards. Organized instruction will be given in the following courses: clinical psychiatry, seminar in psychoanalysis, administrative psychiatry, biopsychiatry, juvenile psychiatry, psychiatric social service, neuropathology, fever therapy, endocrines in psychiatry, research methodology, psychometrics in psychiatry, and biometrics. Examinations will be held at the hospital on March 15, at 9 A.M. Registration is required before March 1, and applications should be addressed to the Director of Clinical Psychiatry, Worcester State Hospital, Worcester, Mass.

#### THE NATIONAL CONFERENCE OF CATHOLIC CHARITIES

Mental-health topics occupied a prominent place in the program of the Health Section of the National Conference of Catholic Charities, held in Cincinnati during the week beginning October 7. Greater use of child-guidance services in the Catholic school system was urged by Dr. Ralph Berger, psychiatrist to the Catholic Charities of Milwaukee, Wis., who led the discussion at a meeting devoted to teacher-child relationships. While child-guidance clinics had no "miraculous powers," Dr. Berger said that they have amply demonstrated their usefulness as an adjunct to education and are quite as important and desirable for parochial as for public schools.

Dr. John O'Brien, of Canton, Ohio, who has just published a textbook on psychiatry and mental hygiene for the instruction of Catholic clergymen, seminarians, social workers, and educators, at another session assailed the notion that psychiatry, and more particularly mental hygiene, were destined to take the place of religion, and deplored the tendency among the clergy to ignore the psychological aspects of moral guidance and to relinquish their leadership in this connection to psychiatrists and sociologists. The goals of psychiatry and religion, he said, are complementary and not mutually exclusive. Too often are problems of marital and family relationships, many of them of an emotional nature, handed over to the psychiatrist, when their management should really be the duty of the priest. The clergy must avail themselves of the knowledge of human nature gained by modern psychology and thus render more effective their work as moral guides in dealing with problems in human adjustment.

At this session the Reverend Daniel B. Corrou discussed the functions of state-hospital chaplains in general and his own work in particular as chaplain to the Utica and Marcy State Hospitals in New York. Most people to-day think that the only duty of the chaplain in the mental hospital is to give the last sacraments to the sick and dying, he said. This is no more true in the mental hospital as con-

ducted to-day than it is to say that the parochial duties of a pastor are confined to this one function. With the various curable types of patients under treatment in the modern mental hospital, as contrasted with those in the institutions of asylum days, the chaplain is in a position to help in many ways and can effectually supplement the psychiatrist's work in the rehabilitation and social adjustment of such patients, provided he bestirs himself to acquire a working knowledge of psychiatric theory and practice. Many patients whose mental problems are complicated by moral and spiritual factors find in the chaplain a source of therapeutic strength and sustenance that may frequently influence for the better mental conditions that do not readily respond to medical techniques alone. Father Carrou urged that, wherever practicable, mental hospitals should have the services of a chaplain on full time and recommended the institution of psychiatric courses in seminaries in preparing priests for such an assignment.

Other psychiatric speakers at the conference included Dr. Walter J. Otis, of Tulane University, New Orleans; Dr. James P. Malloy, Jr., of the Institute of Juvenile Research, Chicago; and Dr. Thomas W. Brockbank, of the Catholic Charities Guidance Institute, New York City, who was chairman of the section. The Rev. Alphonse J. Schwitalla, S.J., of St. Louis University, succeeds Dr. Brockbank as chairman this year; and Dr. Miriam Dunn, psychiatrist to the Catholic Charities of Washington, D. C., was elected vice-chairman.

#### CHILD GUIDANCE AT ST. VINCENT'S HOSPITAL

The increasing interest in psychiatry and mental hygiene noted in Catholic institutional circles in various parts of the country has been recently exemplified in a new project undertaken in connection with St. Vincent's Hospital in New York City. Recognizing the need for psychological and sociological studies of children referred to its pediatric and neurological clinics, this hospital, one of the oldest under Catholic auspices in the city, has instituted a child-guidance-clinic service for the psychiatric study and treatment of behavior problems. The guidance features of the clinic will be directed by Dr. Robert F. Sheehan, assisted by the Rev. Walter G. Summers, S.J., Professor of Psychology at Fordham University, and Mrs. Kathryn E. Serota, social worker. The clinic will also serve as a training center for graduate students of the Fordham Department of Psychology, who will administer the psychological tests required or indicated in individual cases. It is hoped that this clinic will appreciably augment the provision of greatly needed psychiatric facilities for the treatment of problem children in Catholic institutions and parochial schools.

Dr. Sheehan has been in psychiatric practice in New York for many

years. He was formerly in the service of the U. S. Navy and is consulting psychiatrist to the U. S. Naval Hospital of the Third Naval District (New York), chief neurologist of the Misericordia and Community Hospitals, visiting neurologist at St. Vincent's Hospital, and neuropsychiatric consultant to Central Islip and Kings Park State Hospitals and other New York institutions. He is also President of the Board of Visitors of the Harlem Valley State Hospital.

#### A VOICE FROM THE PAST

We are indebted to Dr. James J. Walsh, a practicing neurologist in New York City and formerly dean of the Fordham University Medical School, for the subjoined quotation from the work of a scholar of the Middle Ages. We are so accustomed to the identification of medieval medicine with the ignorance and superstitions traditionally ascribed to the treatment of the insane in that period that a gleam of light shining, however feebly, through the darkness enshrouding the history of their care through the ages takes us by surprise.

Dr. Walsh, after attending the Twenty-fifth Anniversary Meeting of The National Committee for Mental Hygiene, wrote: "I have recently been reading something in Bartholomew, the Englishman, who wrote a popular encyclopedia called *De Proprietatibus Rerum* (*The Properties of Things*). His description of 'madness' is so very like that to which the mental-hygiene movement would direct attention at the present time that I think it ought to find a place in your literature. The passage was written about 1240, that is, almost literally seven centuries ago. It is so very different from what is usually presumed to have been the opinion of insanity at that time as to be very striking:

" 'Madness cometh sometime of passions of the soul, as of business and of great thoughts, of sorrow and of too great study, and of dread; sometime of the biting of a wood [mad] hound, or some other venomous beast; sometime of melancholy meats, and sometime of drink of strong wine. And as the causes be diverse, the tokens and signs be diverse. For some cry and leap and hurt and wound themselves and other men, and darken and hide themselves in privy and secret places. The medicine of them is, that they be bound, that they hurt not themselves and other men. And namely, such shall be refreshed, and comforted, and withdrawn from cause and matter of dread and busy thoughts. And they must be gladdened with instruments of music, and some deal be occupied.' "

#### EYE HEALTH AND MENTAL HEALTH

In an article entitled *The Sight-Saving Class as a Mental-Hygiene Measure*, in a recent issue of *The Sight-Saving Review*, the quarterly journal of the National Society for the Prevention of Blindness, Catherine A. Flanigan points out the mental-hygiene aspects of the



special classes for children with seriously defective vision which are now provided in the public schools of 142 cities throughout the United States.

"That the sight-saving class offers very definite aids in the emotional as well as the physical adjustments of its children has been recognized by those coming in contact with its operation," Miss Flanigan states. "Of course, not all children who come to a sight-saving class are unhappy victims of their environment. Their reactions to their handicap may be very fine, having been aided by understanding and sympathetic parents and teachers. However, even these children may benefit so greatly by an improved physical environment that the adjustments are simpler.

"To the child with defective vision, work in the regular grade with educational media unsuited to his needs may cause a great deal of eye-strain, with the attendant undesirable reactions, nervousness, fatigue, and increased eye difficulty. By use of the proper materials this strain is lessened or eliminated in sight-saving classes. Textbooks are printed on unglazed paper in 24-point type; and in order to provide the children with the desirable amount of research material and to supplement their own limited reading, much reading aloud by the teacher is done in a sight-saving class. Movable seats make it possible for the children to get as close to the board as necessary, very large chalk and large manuscript writing (which has few acute angles) and correct spacing between lines and letters eliminate the strain of blackboard work. Special maps and pictures, large in size, distinct in outline, clear in color, and with a vast amount of detail omitted, provide these children with the illustrative material needed.

"One child, an introvert type, may tend to become more and more of a recluse. This is especially true of myopes because their vision is such that they can see distinctly only when material is held close to the eyes. Because they are failing in subject matter, they tend to work more and more, and sometimes overcome failure by sheer effort, not realizing that they are narrowing their outlook on life and increasing their eye difficulty. In the sight-saving class an attempt is made to draw such a child out of this recluse attitude. The group in a sight-saving class is small and, therefore, he can automatically feel his greater importance in it; his periods of eye work are curtailed, and his activities, during his increased leisure, are guided so that he feels there are other worth-while things in life. Other avenues of learning are opened; a reader may be provided to relieve him of some of the eye work in preparing lessons; and he is helped to understand the use he may make of the radio, museums, and so forth, as sources of information.

"The extrovert child frequently assumes a superior attitude to cover his inability to succeed. He believes that he is different and is proud of the fact. He has an interesting handicap that others do not possess and which many cannot be expected to understand. In most cases parents are to blame for the acquiring of this complex. When the child and his parents are taught that the sight-saving-class teacher understands exactly the limitations of the child, he can then be treated in a manner that will bring about more normal reactions.

"The sight-saving class meets a widespread social problem. About one child in 500 of the school population is in need of this special edu-

cation. Sight-saving classes are a very great preventive of even greater social and mental problems than those mentioned. They do, in a large measure, prevent turning out into the world a number of untrained or unadjusted individuals and also frequently do what the name suggests, save the sight of the partially sighted child. In these latter cases, the sight-saving class prevents society from becoming burdened with the financial and mental problems of the blind."

#### PUBLIC-HEALTH AGENCIES IN HARD STRAITS

Heavy losses in their financial resources during the depression years have seriously reduced the effectiveness of health organizations throughout the country, the National Health Council made known recently in a report issued by Colonel Theodore Roosevelt, President of the Council. Not only has no help come to voluntary health organizations from official sources, but because of their own diminished budgets, official agencies have added greatly to the burdens of private agencies, many of which are barely managing to exist. Support of these agencies, the report points out, is all the more necessary at this time because of the fact that several hundred hospitals and other welfare institutions have been compelled to close their doors since 1929.

President Roosevelt's speech at the dedication of the new veterans' hospital at Roanoke, Virginia, last fall, in which he compared the advantages enjoyed by ex-service men with the "underprivileged" status of the average American citizen in these times, served to emphasize the seriousness of the present situation in public-health work. A study made by The National Committee for Mental Hygiene, shortly to be published, will show what the depression has done to institutions in the mental-health field. Most of our state hospitals are badly overcrowded and many are finding it necessary to refuse admissions. Maintenance budgets have been drastically cut and there is a great dearth of trained personnel. It is hoped that the Federal Government may come to the assistance of our states and localities in their struggles to meet the hospital and health needs of large sections of the population, to supplement the work of public and private-health agencies. With budgets down to subsistence levels (\$2.00 is considered an adequate annual per capita for public-health work; the average to-day is well below \$1.00 and in many cities it is only a few cents) our state and local health departments are hard put to it to maintain vital health services, and many of them, especially in Southern states, are in a well-nigh hopeless condition.

Recent public-health studies are beginning to show what the depression is producing in the way of increased sickness and lowered vitality among the unemployed. The available medical care is pathetically insufficient for hundreds of thousands of cases. In the face of this

mounting distress, it is discouraging to note how little the Federal Government has done to help the country's public-health activities. It is hoped that the administration's social-security program, to be submitted to the new Congress, will presage a "new deal" for the health needs of our "forgotten and underprivileged thousands," and a determination to meet these needs through strategically apportioned Federal aid to state, county, and municipal health agencies.

#### THE EDUCATION OF EXCEPTIONAL CHILDREN

It costs less to educate than not to educate. This is the conviction of Mrs. Roosevelt, as expressed at a conference called by the United States Office of Education to consider the problems of educating children who are seriously handicapped in mental or physical condition. Mrs. Roosevelt emphasized the fact that every community must some day or other pay the price of its handicapped individuals, and that the price of providing special educational facilities for the handicapped child is less than the price of supporting in an institution the handicapped adult who has not been helped to help himself.

States must recognize this fact, she said, and make adequate and suitable provision for the education and care of mentally deficient children, of the emotionally unstable, and of those who are seriously physically handicapped. Local communities must do likewise in planning the programs of their public day schools. Parents, too, must face the facts, recognize the limitations of their children, and plan intelligently to make the most of those abilities which they do possess. Exceptionally gifted children should not be overlooked, Mrs. Roosevelt feels. They should be helped to realize their highest capacities and to offer the greatest possible contribution of service to the world's work when they are grown.

This whole program of special education for exceptional children, Mrs. Roosevelt said, should begin early, at the very beginning of the child's school life or even at nursery-school age. Only thus will it be possible to secure the most substantial returns on the investment and to build adequately for adult life that will not be a burden upon society.

"Our fundamental conception of what we should do for children through education has been wrong," she stated. "It ought to be not to give every child the same type of education, but to find out as early as we can in their education what it is that every child responds to and what lines he should follow, and I think then we would probably do a much better job than we are doing to-day."

The conference at which Mrs. Roosevelt spoke was attended by representatives of organizations engaged in work for the various types of exceptional children, including the physically handicapped, the

mentally deficient, the intellectually gifted, and the emotionally unstable. These persons were called to Washington by the Office of Education from various parts of the country to consider the possibilities of a more extended program and of greater coördination of effort in the work. Commissioner of Education John W. Studebaker and Assistant Commissioner Bess Goodykoontz led the group in the discussion of the problem involved. Workers in the field of mental hygiene who attended the conference and the organizations they represented included: Meta L. Anderson, Public Schools, Newark, N. J.; Charles Scott Berry, The Ohio State University; Dr. Smiley Blanton, American Society for the Study of Disorders of Speech; Edgar A. Doll, The Training School at Vineland, N. J.; Dr. Lawson G. Lowrey, American Orthopsychiatric Association; and Dr. George S. Stevenson, The National Committee for Mental Hygiene.

#### MENTAL HYGIENE IN A STATE EDUCATION DEPARTMENT

The most encouraging development in the year's work of his department, Dr. Frederick L. Patry, Psychiatrist to the New York State Education Department, states in his fourth annual report, has been the institution of a weekly psychiatric clinical service at the Albany Teachers College and the Albany Senior High School and Annex. Steps have also been taken to utilize the psychiatric services available in the State Department of Mental Hygiene at other teacher-training centers in the state.

Dr. Patry reports that normal-school principals are becoming increasingly receptive to the idea of "sharing problems of student mental health with well-trained psychiatrists." President Brubacher, of Albany Teachers College, is quoted as being "very much pleased" with the results of this service, which has helped his students to a better understanding of their personal problems and, in many cases, has resulted in improvement not only in academic work, but also in the direction of "social maturation."

Clinical, consultation, and educational services were also extended to a number of other public and private schools in the state, to various divisions of the education, health, and other state departments, and to educational, civic, child-welfare, and social organizations throughout the state. Besides a heavy schedule of lectures and conferences, numerous articles on mental-hygiene topics in relation to education were prepared for publications and periodicals of every description.

Among the needs and recommendations set forth in his report, Dr. Patry emphasizes the following: the creation of a Division of Mental Hygiene and Psychiatry in the State Education Department, with an adequate staff of clinical and social workers, psychologists, and visiting teachers to assist individual teachers and teacher groups in han-

dling more effectively the problems of the exceptional and handicapped child; utilization of the psychiatric services of the State Department of Mental Hygiene in the examination and selection of candidates for teacher training from the angle of personality and mental health; the preparation and distribution of special mental-hygiene literature for teachers and teachers in training; the establishment of personnel and psychiatric advisory services in state normal schools; and a wider application of progressive education principles in curricular and administrative procedures in the school systems of the state.

As a next step in furthering the aims of his department, Dr. Patry is engaging in a series of conferences with school superintendents, principals, and teachers in various parts of the state. "It is apparent," Dr. Patry states, "that superintendents are more and more looking to the State Education Department for leadership and direction, not only with respect to the definition of policies and the formulation of courses of study, but also to share with them in the management of local problems of organization, of individual and group needs among pupils. Such conferences will promote a more effective association with the classroom teacher, who is our chief concern in developing mental-hygiene attitudes and practices. Such opportunities enable the psychiatrist to become more of an integral part of general as well as special education. He must obligate himself to learn of the daily classroom problems confronting the teacher, since the greater part of preventive work rests upon her. If we emphasize prevention and the early recognition of academic and social maladjustments, we will make unnecessary much of the expensive, highly specialized type of remedial and clinical service."

#### MENTAL HEALTH AND THE ARTS

The place of art in mental hygiene was one of the topics discussed at a two-day symposium held in New York City on September 13-14 under the auspices of the Arts Guild. The conference analyzed the functions of art and art study in relation to progressive education, individual adaptation, cultural values, recreation, and other mental-health needs of the community. Among the speakers from the field of mental hygiene were Dr. Ira S. Wile, Dr. A. A. Brill, Dr. Caroline Zachry, Dr. John Levy, Dr. George S. Stevenson, and H. Edmund Bullis, the two latter representing The National Committee for Mental Hygiene, which has been collaborating in the Guild's work during the past year. The rehabilitative and constructive significance of education in the arts in connection with recovery programs under the New Deal furnished the keynote and point of departure for most of the papers and discussions. President Roosevelt's program has given the American people a new opportunity for



mental and spiritual development, for self-expression, and for the promotion of self-adjustment, several of the speakers said. Dr. Wile pointed out that this opportunity, fostered by increasing facilities for education, for musical and art appreciation, for government-sponsored drama and similar cultural movements, has been "eagerly grasped" by the public with "vastly beneficial results." Mr. Bullis saw in the cultural advance promoted by the New Deal an important contribution to the prevention of emotional disturbances and the conservation of mental health.

Art outlets play an important rôle in the treatment of nervous children, Dr. Levy said. They work in two ways: they serve as a means of bringing into the open buried mental conflicts, which have an irritating effect on the child's personality, and of relieving emotional tensions; and by interpreting and explaining to the child the meaning (in terms of these conflicts) of its art productions, the child acquires insight into his difficulties. "The 'art way' of treatment is the most painless of all direct therapies," Dr. Levy said. "Children do not run away from art procedures as they do from more strictly verbalized ones. This method of treatment is suitable for children of all age levels. One might almost call this approach the 'play method' of treatment. Instead of toys, one uses the child's own pictures, drawings, models, and so forth. These productions also serve as an excellent record of the development of the treatment situation. The opportunity of studying this development is encouraging to the child as well as to the psychiatrist."

The Arts Guild is not an art school in the ordinary sense of the term. Its primary purpose, as defined by the Guild, is "to open the way to a freer and richer life of the individual through the various media of the arts," to give the individual an opportunity and the necessary stimulus for self-expression through art work. It is only incidentally interested in the training of professional artists. The aim of the guild, according to Dr. V. V. Anderson, a psychiatric consultant to the school, is "not to consider art as an end, but as a means (1) to foster the development of integrated personalities; (2) to nurture creative and independent thinking as an element in self-development; and (3) to aid the development of individuality by an approach to the emotional life of the student as a natural and necessary phase of personality training."

During the past year the Arts Guild has conducted a series of experimental courses in five selected educational, vocational, and psychiatric institutions in New York City and vicinity. These courses were designed to show whether the awakening of new means of self-expression can be made to benefit all kinds of persons, from the highly intelligent, well-adjusted adult in need of a restful avocation to the

youngster or adult with nervous difficulties who is in need of actual therapeutic treatment. Funds were supplied by the Carnegie Corporation for the experiments under the auspices of The National Committee for Mental Hygiene. In a report on the project, in which striking improvements were noted in the personality problems of a number of the individuals participating in the courses, the work of the Arts Guild is characterized "as unique and as possessing distinctly new and significant bases, methods, and goals." Among the results observed are psychic gains bringing "a sense of freedom for thinking, feeling, and acting, along with a gradual growth of techniques, interests, and enthusiasms. These enrich personal values, aside from all asset values as professional characteristics. The emphasis is upon the learner rather than upon learning, upon art of living rather than awareness of the arts. Hence the inherent worth of the Arts Guild as an instrument for facilitating personal adjustment on the basis of exploration of the vital arts, the discovery of personal potentials, with researches into and discussions of the meaning of life and life situations."

#### OPERATIONS OF THE NEW YORK STATE DEPARTMENT OF MENTAL HYGIENE IN 1934

The story of New York State's ministrations to the mentally sick and defective during the past year is concisely told in the annual report of the State Department of Mental Hygiene, which has just been sent to the state printing bureau. The department had under its care at the end of the fiscal year 17 hospitals for mental disease, one psychiatric institute and hospital, one psychopathic hospital, five schools for mental defectives, and one institution for epileptics. The resident patients under treatment numbered 71,281, of whom 57,374 were mentally ill, 11,778 mentally defective, and 2,129 epileptic. In addition, 6,804 patients were under supervision outside of institutions. Admissions during the year included 14,881 mentally ill patients, 1,787 mental defectives, and 374 epileptics, a total of 17,042. There were 5,154 deaths in the institutions and 7,672 patients were discharged. The net increase in resident patients was 2,629 and in patients on parole, 1,244.

The total expenditures of the Department of Mental Hygiene during the fiscal year were \$35,295,483.95, of which \$29,440,690.58 was expended for state hospitals; \$5,535,903.83 for state schools and Craig Colony for Epileptics; and \$318,987.54 for general administration, preventive work, and the transfer and removal of patients. The per capita cost of maintenance of patients, exclusive of housing, was \$344.77 in state hospitals, \$289.39 in state schools, and \$293.37 in Craig Colony.

To make provision for the increase of patients and to relieve overcrowding, a comprehensive building program was carried forward during the year. New buildings were completed and put into use at four institutions.

The department carries on preventive work by means of public education, mental-hygiene clinics, and social work. An important feature of the year's educational effort was the planning of courses in mental health for public-health nurses which is now being carried out on a state-wide scale. About 1,700 nurses are taking these courses.

Clinics conducted by the Division of Prevention include child-guidance clinics and clinics for adults with incipient nervous or mental disease. The latter also aid in the rehabilitation of paroled patients. During the year child-guidance clinics were conducted in 162 cities and villages of the state. Altogether 958 clinic sessions were held and 5,955 children were examined. The clinics for adults received a total of 34,340 visits, of which 8,129 were new cases. These clinics were conducted in 70 different places.

The report calls attention to the remarkable increase of patients in the civil state hospitals for mental disease in recent years. The net increase of patients on the books of these hospitals during the past five years was 12,623, an average of 2,525 per year. These additions to hospital population are largely due to increases in the arterio-sclerotic, alcoholic, and dementia-praecox groups. In 1934, the number of new admissions in each of these groups was greater than in any preceding year in the history of the state-hospital system.

An interesting feature in connection with the state care of mental defectives is the experiment in family care carried on in the village of Walworth, New York, by the Newark State School. Following in a general way the system of family care which has been successfully carried on for centuries at Gheel, Belgium, this institution has placed 40 suitable patients in good homes and is paying for their care at a reasonable rate. The home life thus afforded is pleasing and beneficial to the patients and the state is spared the expense of erecting new buildings for their care.

#### NEW STATISTICAL MANUALS AVAILABLE

After extensive revision and modification, a new (sixth) edition of the *Statistical Manual for the Use of Hospitals for Mental Diseases* has just been published by The National Committee for Mental Hygiene. A new (second) edition of the *Statistical Manual for the Use of Institutions for Mental Defectives* has also been issued. The new manuals include all significant changes in nomenclature and classification adopted by the American Psychiatric Association and the American Association on Mental Deficiency and a number of im-

provements in procedures for the guidance of institutional executives in statistical reporting and record keeping. These publications not only are of indispensable value in the institutional field, but have also been extensively employed as texts in certain college courses and are of interest to a large body of scientific workers in related fields. Single copies sell for fifty cents. A special rate of twenty-five cents each is offered for orders of ten or more copies of either manual.

#### A CORRECTION

In a report in the last issue of MENTAL HYGIENE on a project which the Commonwealth Fund is supporting for the medico-psychological study and treatment of children's disorders at the Children's Hospital in Boston, in collaboration with Harvard Medical School, and in which a staff of pediatricians, psychologists, and a psychiatric social worker is engaged, it was erroneously stated that "no provision is made for the services of a psychiatrist." While it is true that the budget for this undertaking does not provide for a psychiatrist, we are informed that there is available at the Children's Hospital a psychiatrist who can and will be called upon for consultation services when necessary.

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